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Charlotte Medical Journal.

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Original Communications.

A Few Plain Words on Glaucoma.

By Richard H. Lewis, M. D., Surgeon for Diseases of the Eye, Ear, Throat and Nose to St. John's Hospital, Raleigh, N. C.

The relatively large number of cases of absolute and hopeless blindness from neglected glaucoma coming under my observation has suggested to me the propriety of making an effort to do something in the way of prevention of such sad occurrences. Blindness from this cause is peculiarly deplorable for the reason that the afflicted one is not only cut off from all perception of light even—a deprivation that only the blind who retain the power of discriminating between day and night can fully appreciate—but is a sufferer in many instances from repeated and long-continued attacks of severest pain. So that, if, by what I shall have to say, I prove to be the indirect means of saving not more than one person from such a fate, I shall feel that this imposition on your patience was not without justification.

Before going further, I wish it to be distinctly understood that in using the expression "neglected glaucoma" I did not mean to indicate an intention to lecture my brethren of the general profession, because, as a matter of fact, I believe that, in most instances, the patient is to blame. But I cannot in candor say that it is always the patient's neglect. It must be admitted that, sometimes, the failure of the physician first consulted to make a correct diagnosis, which, it should be said, is not always an easy matter, consigns a curable case to hopeless and life-long darkness. Consequently, since the best informed amongst us is liable to become more or less rusty in his knowledge of a disease that is so rarely brought to his attention as the one we have under consideration, it would not be amiss to emphasize a few salient points bearing on

Read before the North Carolina Medical Association at Wilmington, May 17th, 1892.

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its diagnosis and early management. I shall not attempt to draw a complete and finished picture of the malady, filled in with minute details and nice touches, but a simple sketch, made with a few broad strokes, representing only the essential features manifest to the ordinary medical observer. And so, a citation of the ophthalmoscopic signs, and all discussion of its etiology and pathology, as well as the consideration of whatever is exceptional, will be purposely omitted as not coming within the limited scope of this paper.

For our purpose it would be best to consider only the three ordinary forms of the simple or chronic, the subacute and acute inflammatory. The symptoms common to all forms are, failure of sight, increased tension or hardness of the eye-ball, dilated pupil, and contraction of the visual field, especially towards the nose. The most characteristic of these is increased tension, which is to be ascertained by gently palpating the globe through the upper lid as the patient looks at his feet, very much in the same way as for pus in a suspected abscess. If not familiar with the feeling of the normal eye, a comparison should be made with the other eye, if unaffected, or with the examiner's own. The next most important symptom is dilatation of the pupil, particularly if it does not respond to light. A fact of great assistance, in a negative way, in helping to a correct diagnosis, is that the subject of glaucoma is almost sure to be past middle age, or old enough to wear spectacles for reading. And the first thing one suffering with chronic glaucoma, as a rule, notices is that his spectacles do not suit him as well as they once did, and that he cannot find any that will bring his sight up to the original standard. The need for frequent changes in his glasses is often a premonitory sign. He will then complain that at times there is a fog or haze over his sight, lasting for a greater or less period, and then passing off entirely for a while, only, however, to return again at shorter intervals, denser in character and hanging over him longer. While this fog is present he will tell you, usually, that when he looks at a lamp or other light it seems to be surrounded by colored rings, haloes or rainbows —a phenomenon only found in glaucoma, except when produced by mucus on the cornea, which can be easily removed by winking. Pain, if present at all, will be slight and occasional. A superficial inspection of the eye will show the sclerotic white, the cornea clear and bright, and, in a word, the eye perfectly normal in appearance,

save a slight dilatation and some sluggishness of the pupil. The tension will probably be a little increased, and the field of the vision somewhat narrowed.

In the subacute form, after, in all likelihood, a few premonitory attacks embodying the syptoms just enumerated as belonging to the chronic, there will be a more rapid failure of sight—pain in, but chiefly around, the eye, over the brow, in the temple, down the side of the nose, and, sometimes, all over the side of the head, will be complained of—the globe will be very distinctly hard—there will be some redness of the ball, or rather duskey character, most marked just behind the sclero-corneal junction—the cornea will look rather steamy—the anterior chamber will generally appear shallow, the pupil will be dilated and probable oval in shape, and, instead of of being black, it will be of a yellowish green color.

The acute form is simply an exaggeration of the subacute. The onset is more rapid—the tension greater—the pain more severe—the redness more intense, in some instances extending to the whole conjunction with a swelling of the lids—occasionally there is a photophobia—the pupil is more widely dilated, though not necessarily *ad maximum*, and fixed—the cornea looks more hazy and insensible to the touch of a light, soft object, as a feather or wisp of tisue paper—and sometimes there is fever with nausea and vomiting. Inasmuch as the mistake has been made, I will take the liberty of saying that, should you have a case of supposed remittent fever, who, at the same time, has had a bad eye, do not be satisfied with your diagnosis until all doubt as to the nature of the ocular trouble is removed, and *do not wait for him to recover from the fever, or "bilious attack," before attending to his eye.*

The disease with which inflammatory glaucoma might be confounded are, iritis, conjunctivis, cataract, inflammation of the cornea and neuralgia. There are many resemblances between acute iritis and acute glaucoma, and there are many differences, but the similar features, unfortunately, are of a coarser and more easily recognised character than the dissimilar. In order to avoid confusion, I will rest the differential on two symptoms, or signs, only—the state of tension and of the pupil. While in iritis the tension is sometimes increased, it amounts to practically nothing, but in glaucoma it is the pathognonic symptom, and in the inflammatory form—with which alone iritis could be confounded—it is

almost certain to be very distinct, and pronounced. The pupil in iritis, if changed at all in size, is smaller than the normal, but in glaucoma it is almost invariably larger than natural, and, in an immense majority of cases, very much larger. If in doubt, compare with sound eye, should there be one, or with a healthy eye in another individual of about the same age and in the same light. Never fail, therefore, to examine more carefully the pupil in every red eye belonging to an elderly person, and particular if that eye be free from a muco-purulent or purulent discharge—the presence of this discharge being the characteristic symptom of conjuctivitis. In conjuctivitis the redness of the globe increases from before backward, while in glaucoma, as well as in iritis just the reverse is true. In conjunctivitis, too, the sight is scarcely, if at all, impaired—in glaucoma it is apt to be very bad.

The change in color of the pupil, together with the dimness of sight, is suggestive of cataract; but the fact that the loss of sight has been more or less rapid, the signs of inflammation, congestive and pain nearly always present, certainly in the severe forms, and especially the dilated and fixed pupil; signify plainly that the case is not one of simple cataract; while, if the tension be increased, in addition to the above, it settles the question, proving that it is not only not cataract, but glaucoma.

The only symptom of glaucoma calling to mind keratitis is the haziness of cornea, but it is slight and generally and evenly diffused, not patchy, as it always is in inflammation, of the cornea. The opacity in interstitial keratitis, which by the way, it should be remembered, is a disease of childhood, although diffused, is denser in some parts than others—the cloud has thin places in it. Again in affections of the cornea, a photophobia and lachrymation are prominent symptoms—in glaucoma they are secondary, if not altogether wanting

Although in neuralgia of the ophthalmic branch of the trifacial lachrymation with redness of the conjuctiva and occasionally photophobia as well as sensations of dazzling light and colors are not indifferently diagnosis is not difficult, even when they are. In the neuralgic affection vision is practically unimpaired, the pupil is normal in size or smaller than usual, the tension is not increased and the sensations of light are subjective and different from the

rings or haloes of glaucoma that appear to surround the lamp or other point of light looked at.

It is of vital importance that glaucoma and iritis should not be confounded with one another, for the remedy appropriate to each is generally positively injurious to the other, in some instances actually exciting an attack in a healthy eye predisposed to that particular affection. If the pupil be carefully examined and its size noted the mistake in the application of remedies could not well be made, for it is the most elementary common-sense, it seems to me, for every one using remedies directed to the pupil to attempt to contract a pupil that is too large and to dilate one that is too small. Attention to this simple rule would insure practically the use of a myotic, eserine sulphate or pilocarpine muriate, in glaucoma, and a mydriatic, atropia sulphate, in iritis.

Having made the diagnosis of glaucoma its early management is very simple. It consists in the *immediate* use locally of a myotic, sulphate of eserine, a drop or two of a solution of a strength varying from one to four grains to the ounce, or pilocarpine of double that strength, in the eye every hour until the pupil contracts, pain is relieved and sight improved, and continued afterwards three or four times a day until the trouble has passed off. Hot applications, purgatives, hypodermic injections of pilocarpine, etc., are sometimes helpful, but such uncertain palliatives should never be depended on, except only when nothing better can be done. Should the pupil not respond to the myotic and a marked alleviation of the symptoms occur in twenty-four hours, or if its use increase the pain and inflammation, as it sometimes does, an iridectomy or sclerotomy, preferably the former, in my opinion, should be done at the earliest possible moment. Acute glaucoma is a disease that allows no dallying in its treatment—the price of sight is *promptness*—and, eserine or pilocarpine failing, the knife is the only hope.

My experience with eserine, while very much mixed, has been, on the whole, encouraging. One case is sufficiently striking to deserve reporting, and the following is a brief account of it:

Mrs. N. J. M., age 33, was sent to me by my friend Dr. Thomas F. Wood six years ago. At the time of her visit the left eye was entirely blind, presenting the symptoms of absolute glaucoma with scleral staphyloma. She stated that the trouble began in that eye

eighteen months before. The right eye was normal in every respect, including acuteness of sight and amplitude of the field of vision, except that the anterior chamber was too shallow, the pupil plainly larger than it ought to have been, and the tension slightly increased. But she had had some premonitions similar to those leading up to the disastrous consequences shown in the left eye, and she was wise enough to seek advice in time. She was given a solution of eserine, re-enforced with boracic acid to preserve it, instructed as to its use, and thoroughly impressed with the vital importance of returning immediately for operation should the eserine fail. It worked like a charm, and for three years sight continued fully up to the standard, but a time came when it did fail, and, true to instructions, she promptly returned for further advice. Her good eye then presented all the symptoms of subacute inflammatory glaucoma, and vision was reduced to an ability to count fingers at a few feet. Thinking that her drops might have lost their efficacy from age, a fresh two-grain solution was tried before resorting to operation, and the attack was quickly relieved and sight completely restored. Since then her attacks, returning as they have from the beginning in a mild form, usually two or three times a week, have been effectually aborted by the eserine, and when last seen, eight months ago, her eye was in excellent condition with one serious exception, namely, a severe attack of follicular conjunctivitis. Whether the fungoid formations in old solutions that had undergone decomposition excited the inflammation, or it was the result of the long-continued use of the alkaloid I do not know; not improbably the latter, however, as other observers have noticed the same condition after prolonged use of eserine. The effect of atropia on this line is familiar to all, and the persistent instillation of cocaine has been known to cause conjunctivitis granulosa (follicular?) In a letter written just one week ago to-day she says: "My eye improved rapidly after seeing you last, the attacks not averaging more than one once in three weeks up to the present. Within a day or two it looks a little inflamed, but am not suffering very much. Have not had an attack in nearly a month. Can read No. XX at the distance of twenty feet. I continue to use one drop once every day; also use it when I have an attack (more freely she means). P. S.—I forgot to tell you I have had a few times of frequent attacks since I saw you."

This case is interesting and instructive for several reasons: the comparative youth of the patient (33), the great frequency of the attacks, two or three a week most of the time—as confirming the opinion that the long-continued employment of eserine will excite the follicular form of conjunctivitis—but chiefly as showing the efficacy of that drug in the treatment of this most dangerous disease of the eye, and that, too, when used once every day, or oftener, for so long a period as six years.* But it must be borne in mind that this is a very exceptional case, and that in many instances eserine is entirely without effect, and in some positively injurious. Still it has been known to finally cure some cases, and is, unquestionably, of very great value as a palliative, often relieving the urgent symptoms and saving the eye until more radical treatment can be obtained. Indeed, eserine and pilocarpine, it may be said, are the only medical remedies for glaucoma. And so, every practitioner—certainly those not prepared to do an iridectomy—should make it a point to see to it that either some druggist within reach keeps them, or that he has a small quantity of one or the other of them in his own medicine chest. As eserine deliquesces very easily, it would probably be best to keep it in hermetically sealed glass tubes or in the more elegant form of gelatine discs. Before leaving this subject it is proper for me to add that I have never had any personal experience with pilocarpine in glaucoma, because I have always thought it safest to rely on eserine; but, in the opinion of some, it is, if used in double strength, just as effective, and it certainly should be tried if the eserine cannot be obtained.

As a corollary to the above I would say: Every person old enough to wear spectacles, complaining of an impairment of sight

*Just after reading this paper I had the gratification of seeing Mrs. M. and finding her eye in excellent condition, notwithstanding a pretty sharp attack the day before—the first in a month. Save a slight shallowness of the anterior chamber it was normal in every respect—vision up to the standard and the optic disc not in the least cupped. The follicular conjunctivitis present when seen eight months before had disappeared under the use of a simple borax lotion prescribed at that time in spite of the continued instillation—daily, if not more frequently—of the eserine collyrium. From this fact I am confident that the conjunctivitis was excited not so much by the long-continued use of the alkaloid as by the impurities resulting from degenerative changes in the solution. I questioned her again as to the character of the frequent attacks, and she stated that they were accompanied by dimness of sight, dilated pupil, hardness of the globe, as well as she could ascertain, and the haloes around the lamp, and were therefore truly glaucomatous. I shall try to wean the eye from the myotic by substituting pilocarpine, the weaker of the two, for the eserine, and gradually diminishing the strength of that. LATER: Pilocarpine was tried, but did not act as well as eserine.

not remediable by a change of glasses, should seek medical advice. And especially should this be done if he notices variations in vision, sight being at one time hazy and at another clear, or if he has observed the haloes or rainbows around the lamp. The fog in glaucoma generally lifts entirely at times, or it rapidly becomes dense, while in cataract it is always present and deepens very slowly. But just here comes in the main difficulty alluded to in the beginning, and that is, that the party with the cloud of blindness hanging over his life will not seek advice until it is too late, deluding himself with the theory that it is merely a little "cold in the eye," and satisfying himself with "alum curds," rotten apple and such other—"rot."

Fortunately glaucoma rarely ever attacks both eyes at the same time, and consequently it is more than probable that some physicians will be seen, if not for that, for some other trouble, before the second eye is involved. If so, and the first eye should be found to have been from that disease, he should feel it to be his imperative duty to impress upon the patient, as forcible as possible, the fact that the same trouble is practically sure to occur sooner or later in the good eye, to insist upon his seeking medical advice upon the very first signal of danger, and warn him of the fearful consequences of *delay.* Having lost an eye he will be more ready to listen to advice. But there is a rock that sometimes shows in this latitude on which the medical mariner, inexperienced in sailing ocular seas is liable to make shipwreck, and we must mark it plainly on our chart. That rock is secondary cataract—cataract coming after, and consequent upon, the glaucoma. The danger consists in attributing the blindness to the cataract, instead of to the glaucoma, its real cause, thereby permitting the patient to sink into hopeless darkness under the false impression that his trouble is one that can be almost surely relieved, and at any time, after he has become completely blind, that may suit his convenience. It is true that in most instances the second eye has been ruined before the first becomes cataractious, but it is in danger nevertheless. We will mark it by calling attention to the fact that in cataract secondary to glaucoma the pupil is dilated and does not contract on exposure to bright light, the perception of light indeed being generally lost at that stage of the disease, while, in simple idiopathic, or primary cataract, the pupil is normal, or, if slightly dila-

ted, quickly and promptly responds to variations in the amount of light, the perception of which is good. This would be sufficient to base an opinion upon, but hardness of the globe, enlarged tortous vessels on its surface and the history of the case would be confirmatory. Another reason for being careful to make the distinction between ordinary seniel cataract and that consequent upon glaucoma is that, by so doing, the patient may be saved, perhaps, a long and expensive journey with bitter disappointment at the end of it.

How to overcome the main difficulty, namely, the carelessness and indifference of the person most interested, is, I confess, a question hard of solution. The only thing I can suggest is for the profession to attempt the education of the people—planting a seed here and there—by calling attention whenever occasion may arise to the fact that any elderly person with marked impairment of sight beyond the aid of glasses and accompanied by any symptoms whatsoever other than a very slowly increasing dimness, shows a reckless disregard of one of God's choicest blessing if he does not promptly obtain the opinion of his physician as to its nature.

Written Expressly for THE CHARLOTTE MEDICAL JOURNAL.

Clinical Reports.

BELLEVUE HOSPITAL, NEW YORK CITY, Nov. 22, 1892.

SERVICE OF PROF. F. S. DENNIS.

Wiring Fractured Patella.—The patient was a boy, fourteen years of age, who, a few days ago, in attempting to save himself from a fall, sustained a simple fracture of the right patella, due to the force of muscular action. The fracture was transverse and in the center of the bone, as is usually the case in fracture of this bone.

The symptoms of fractured patella were well marked, i. e., loss of power to extend the leg, independent lateral mobility of the fragments, and a well-marked gap between the fragments.

There are two methods of treatment for such fractures; the limb could be placed in an apparatus to procure immobility and kept in position for eight or ten weeks. This is applicable where the periosteal covering of the bone is intact and the separation of the fragments is slight. This method of treatment would be out of

place in a fracture of the nature that this boy has suffered. Ligamentous adhesions are all that would hold the pieces together and the patient would be left in a semi-crippled condition during the remainder of his life.

Cutting down into the joint and wiring the patella is a much better course to pursue. In this way the patient is well in from two to four weeks and sustains no subsequent difficulty in the joint. The operator has wired the patella about fifty times and in no case has he had unfavorable results or any reason to regret having performed the operation. The objection to the operation is that the limb, and often the life of the patient, is risked—a risk which it is urged is too great, considering the nature of the wound to be relieved. The same is true of any surgical operation; but select your patients and use proper antiseptics, and there is no reason why the results of this operation should not present a low mortality. It is not applicable to every case of fractured patella. Your patient must have healthy heart, lungs and kindeys, and be in general good health. After such an operation the patella which was fractured is in better condition than it was before, for the line of union is the strongest part of the bone and there is no well authenticated report of a refracture of a patella when the fracture has taken place at the old line of union.

Very rigid antiseptic precautions were made in regard to this patient. Twenty-four hours before the operation the limb was shaved, scrubbed with soap suds and washed with corrosive sublimate solution and ether, and wrapped in moist gauze. The instruments to be used were boiled and left in carbolic solution over night. The patient was thoroughly anæsthetized. Incomplete etherization is out of place here, for the shock caused by the patient's feeling the first incision made may prove violent enough to to cause a cessation of the circulatory or respiratory function.

A transverse incision was made across the front of the joint on a level with the lower boundary of the upper fragment. A longitudinal incision of the same length crossed this one in the median line. A large clot of blood was turned out as soon as the tissues were dissected back, and the wound irrigated with a weak solution of bi-chloride; a strong solution would cause a profuse synovitis to be set up. A very important step of the operation was the removal of a large piece of fascia from between the fragments.

When this is not removed it is the cause of non-union of the fragments. There may be a fringe of periosteum fascia, or synovial membrane, and when it is not removed ligamentous adhesion is all that is ever obtained.

The surfaces of bone to be united were now freshened and made to bleed by means of scraping them with a horse-scoop. The fragments were then drilled in the medial line, the drill holes running from the anterior attached border of each fragment to the posterior free borders of the fractured surfaces. A large silver-wire suture was now introduced, the fragments approximated and the ends of the wire cut short, twisted together, and hammered into the bone.

The capsule of the joint was now sutured together with fine catgut. This is important, for should the wound fail to heal by first intention, the rapid union of this capsule will prevent the entrance of pus into the joint. A rubber drainage tube was inserted, escaping in the under part of the joint, through a perforated wound, made for the exit of the tube, thus encouraging drainage from the most dependent part of the joint. Strands of horse hair also facilitated drainage through the lower part of the anterior longitudinal incission. The superficial sutures were now sutured and the wound dressed with iodoform, bichloride gauze and absorbent cotton.

A posterior splint was now applied the whole length of the limb and the limb bandaged in a large wire cuirass to equalize pressure. The patient should be kept well under the influence of ether till all this is done, for any muscular movements before this time may separate the recently approximated fragments. Keep the limb elevated for a few hours after the operation, thus relaxing the quadriceps extension, and lessening the liability of any muscular exertions he may make before completely regaining consciousness, from snapping the wire. The drainage tube and horse hair will be removed in three days and the limb put up in Plaster-of-Paris. The patient will probably be able to walk in two or three weeks.

Haematoma.—A man, twenty-five years old, fell from a third story window, striking the pavement below, on his buttocks. He was brought into the hospital with a temperature of 102°f, and profuse ecchymoses and swelling of the left buttock. The swelling caused marked tension over the whole left gluteal region. An

incision five inches long was made through the center of the tumor, and about a quart of clotted blood turned out. This was an acute process, and would have sloughed and caused sceptic abscess in forty-eight hours. The wound was washed out and left open to encourage drainage.

Amputation of Breast.—Patient was a woman, forty-five years old, the mother of three children. Several months ago she fell and received an injury of the left breast. This was the starting point of a growth that was diagnosed as malignant.

Two incisions were made. The first beginning near the median line and extending across the lower part of the breast to the axillary region. A second one was made, beginning at the same point, but curving upward about three inches above the lower one and extending outward the same distance as the first one. A large, hard tumor was found, firmly adherent to the underlying tissues. This was removed and with it the pectoral fascia and part of the pectoral muscles. The axillary glands of the left side were then removed, thus lessening the liability of the disease extending to the lungs. A large drainage tube was inserted and the skin sutured together and the wound dressed in the usual manner.

The tumor was analyzed and found to be a typical sarcomatous growth. As but two per cent. of these cases are permanently cured, and as this one is well advanced, a three months' lease of life was given to the patient.

A few days after this operation the left lung was found to be involved, giving marked dullness at the base. A hypodermic needle was introduced at the lower angle of the scapula, and a blood-stained, sticky fluid obtained. In this fluid were branching masses of budding or group cells, characteristic of malignant growths in serous cavities. Blood-stained fluid from a serous cavity, except in those of a hemorrhagic or tuberculos diathesis, is diagnostic of malignancy.

Repairing Stump.—Patient was a man, thirty years old, who had his arm amputated at the shoulder about a month ago. The operation was improperly done, as there were left all the requisites of a bad attempt, i. e., the bone insufficiently covered, the cicatrix adherent to the bone, and the nerves adherent to the cicatrix. He has been troubled with severe neuralgic pains at the site of the

operation, and manipulation of the stump causes pronounced muscular spasm. Keloid growths, little connective tissue neoplasms, cover the old scar.

An incision was made and the end of the bone exposed, on the under side of which was found a spicula of bone, half an inch long. This was removed, the end of the bone made smooth, and the flaps replaced and sutured.

Recent Observations on Sufonal.

Sulfonal has been doing very satisfactory work in general practice, largely supplying the place of narcotic drugs in conditions in which the use of the latter is unadvisable. The usefulnes of this remedy has called forth many expressions of opinion from all parts of the country. Among these we cite the following from Dr. J. H. Mackay, printed in the Medical and Surgical Record of May, 1892.

"Sulfonal has been introduced into my medicine case to stay. Not often will it be needed, but in a few cases, no other remedy can fill its place. My first experience with the remedy was in a case of grip. My patient was nervous, restless, had a hacking cough and headache and had not slept for upwards of thirty-six hours. At nine o'clock in the evening, as there was no indication of sleep and he was worn out, I gave twenty-five grains in a half cup of hot water At eleven he fell into a dreamless, physiological sleep which continued without interruption for eleven hours. He awoke refreshed, with mind clear, pulse normal and no headache or subsequent drowsiness, ate some breakfast, spent a comfortable day, and slept well on the following night without repeating the dose of Sulfonal. Other remedies of course were given for cough and fever. Another case was one of alcoholic insomnia. Patient had been on an extended spree—one of many such—and was verging on delirium. For several days and nights, sleep was impossible. The stomach was irritable, and the pulse rapid. He had been there before and had learned the use of antidotes and hypnotics, but they only increased the irritability of the stomach and the excitability of the brain and heart. I gave twenty grains of Sulfonal and in two hours afterwards, the vomiting ceased, the pulse slackened and the patient slept for several hours. The vomiting did not return. Before using Sulfonal, I had exhausted my resources to quiet him."

A Cause of Prostatitis.

BY J. W. IRWIN, M. D., LOUISVILLE, KY.

I do not intend to speak of the general causes of this disease; my remarks will only apply to prostatitis following bicycle riding.

Within the last eighteen months five cases of prostatitis have come to my notice, which could be traced directly to the pressure on the prostate gland by the saddle of the bicycle. Four of the subjects have passed the years of middle life, and one is in his teens. In all cases the phenomena presented by them were very similar in character, and a general description of the cases, will, I hope, suffice.

After riding the bicycle for a few hours, during the act of micturition a feeling as though the vesicle end of the uretha was raw, was experienced; then a full feeling behind the scrotum came on which was unattended by pain. Inordinate and persistent erections of the penis, coming on at short intervals and lasting three or four days was the most unpleasant feature observed.

The urethra during the act of micturition felt raw and tender under pressure; weight and some dull pain, was felt in the testicles. There was no discharge from the penis at first, but after two or three days a little moisture was observed coming from the meatus urinarius. The discharge seemed to be very thin and colorless. The desire to void the urine more frequently than normal was present while the trouble lasted.

The treatment advised was saline laxatives, and the free use of water internally. For the relief of troublesome erections of the penis, mono-bromide of camphor in large doses was advised. This course of treatment, together with the removal of the cause, gave relief in from five to seven days.

In presenting this report for your consideration, I do so believing that others have observed similar phenomena following the use of the wheel-horse.

When time, which regulates the fashion of the hour, has been consulted, who knows but one of the most annoying troubles which the male subject has to bear, may be brought on prematurely by pressure of the bicycle saddle on the prostate gland? Certainly urethritis extending into the bladder has resulted from its use in the cases reported.—*Medical and Surgical Reporter.*

Charlotte Medical Journal.

E. C. REGISTER, M. D., J. C. MONTGOMERY, M. D.,

Editors and Publishers,

No. 36 South Tryon Street, Charlotte, N. C.

SUBSCRIPTION, $2.50 PER YEAR.

Articles intended for the Original Department of the Charlotte Medical Journal will be accepted only with the understanding that they are contributed to it exclusively.

EIGHTEEN hundred and ninety-two is only remembered with the completed and abandoned past. To our many readers we greet you with a happy New Year, and hope that throughout the coming days of 1893, your lot may fall in pleasant places.

THE Board of Trustees and Faculty of Jefferson Medical College have purchased two large lots on Broad street. They will at once erect a handsome building at the cost of $500,000. In the building will be a hospital, lecture hall and laboratory. It will be ready for use the session of 1893–'94.

THE Arkansas Board of Health has the power of revoking the license of any physician guilty of habitual drunkenness. This is a fine law. It seems though that the demand by the people for an habitual drunken physician would not be great, and from sheer poverty he would have to enter another field for any remuneration.

KILMER'S Physician's Pocket Day Book, Journal and Ledger, is a neat, concise, complete, Russian bound book. It is about seven inches long and four wide, with proper thickness. It has been so perfectly arranged that accounts can be kept with 600 individuals. This book contains every thing in a nut shell. All old accounts and unsettled bills can be easily kept and produced at a moment's notice. It contains a cash book, engagement lists, obstetrical memoranda, list of poisons, &c. 'Tis a most complete work.

A BULLET PIERCES THE HEART. ONE OF THE MOST INTERESTING CASES ON RECORD.

ON Friday night, November the 25th, the Junior Editor of this Journal was called hurriedly to see a man who had been shot in this city. Proceeding at once to the scene of the accident I found a man, partly unconscious, lying on the floor, with a bullet hole in his breast. Judging from appearances he was a man of thirty years of age, about six feet in height, weighing probably 190 pounds. On examining the wound, I found that the ball had entered the body two and one-half inches below the nipple, striking the lower part of the sternum just a little to the right. In using my probe I found that it would pass obliquely to the left and backward about two inches, also downward and backward in the direction of the liver about the same distance, no other direction could I get the probe to enter. Patient still partly unconscious. Putting him to bed and quieting him with a hypodermic of morphine I left him till morning. On the following morning I visited him again, and to my surprise I found him sitting up in a chair, had regained consciousness, eaten some breakfast and said he felt fairly well. On taking his temperature I found it to be 101 and his circulation 120. I again had patient put to bed with instructions not to get up under any circumstances. Around the entrance of the ball was a slight swelling, no bleeding and apparently a very insignificant wound.

His breathing was rapid—32 to the minute. I gave instructions to keep him on milk diet alone and give him a little tinct. opii. deod. if necessary. I again visited him in the afternoon at 6 o'clock. His temperature was 103, pulse 127, respiration 36, with much difficulty in breathing. His countenance was that of an ashy, yellowish hue. Continued the treatment. On Sunday morning, the second day after the accident, I saw patient. Apparently he was much better. I found his breathing much better with less struggling, his pulse still very high, with a temperature of 99. Disobeying instructions, he had been up and walking about during my absence, had taken milk often and with no difficulty, asking for something more to eat. Sunday evening I visited the patient and found his condition about the same as in the morning. He had taken nourishment freely during the day and became worried and

fretted because he was not allowed his regular meals. I visited patient on Monday morning, as usual, and found that he had been sitting up in bed, complaining that he was tired of lying so much, and that to sit up in bed rested him. His temperature was normal, respiration 38, and pulse 130. His breathing was entirely thoracic. On the same evening I found that his condition was no better and his chances for recovery were growing less favorable. On Tuesday morning's visit I found the patient partly unconscious, breathing exceedingly rapid, with great struggling, and with each respiration came a groan of agony and suffering; pulse so fast I could scarcely count them. Saw patient about 1 o'clock same day and found him no better, rapidly growing worse, expecting him to die at any moment. At 5 o'clock he died. Dr. H. M. Wilder and Dr. E. C. Register, of this city, accompanied me on my visits to patient. On Wednesday morning at 11 o'clock Dr. H. M. Wilder, assisted by Dr. Faison and myself, held the post mortem. As stated above, the ball entered body two and one-half inches below nipple at lower edge of sternum a little to the right. No certainty as to the direction of the ball could be found at this time. Judging from position of wound one would think it had pierced the stomach, the lower border of liver and diaphragm, possibly a lung. During his illness no blood was passed, either through mouth or through fæces, neither was there any vomiting indicating that probably the stomach had escaped injury. Proceeding with the post mortem in the customary manner, we found the bullet had passed to the left and backward, missing the stomach and diaphragm, entering the left pleural cavity causing abundant effusion. On further examination we found to our great astonishment that the ball had entered the right ventricle on one side, passing through the cavity of ventricle, making its exit on the opposite side.

This case is especially interesting on account of the length of time the patient lived after he was shot, which was ninety hours. The only cases on record in which a pistol ball, passing through both wall and cavity of right ventricle, that did not prove immediately fatal, are two cases reported in the surgical history of the late war. One patient lived one hour and a quarter after a perforation of the right auricle and left ventricle by a conical pistol ball. In the other case the patient lived forty-six hours after a perforation of the left auricle and left ventricle by a pistol ball.

P. S.—This is the case that was reported in the Richmond papers

some time ago and in the News, of this city. After we held the autopsy, Dr. Paul Barringer was shown the heart and he hurriedly reported the case.—EDITOR.

WE call the attention of our readers to our new advertisers in this issue. Among the number please notice those of the New York Pharmaceutical Co., Bedford Springs; Peacock Chemical Co., St. Louis, and the Odd Chemical Co., New York. These houses manufacture goods of the highest quality, and any business relations with them will be entirely satisfactory.

THE QUACK QUESTION AS HANDLED BY THE CITY COUNCIL OF MANSFIELD, OHIO.

AT the meeting of the Council of the City of Mansfield, Ohio, on November 29, 1892, an ordinance was passed by a two-third majority which prevents any quacks or itinerant venders of medicine, "toothpullers" or other imposters practicing their nefarious schemes in that city without first getting a permit from the Health Officer, who, by the ordinance, is required to be a regular physician. The ordinance also requires these quacks to display a diploma from some respectable college before the Health Officer can give them the necessary certificate entitling them to a license at all. On the presentation of said certificate to the Mayor they can receive a license for which they must pay not less than $25 nor more than $50 a day, and are also subject to a fine of not less than $25 nor more than $50 for each and every offense for the violation of this ordinance.

The law goes into effect immediately after its publication and covers physicians, mid-wives, pharmacists and dentists. If every city council throughout the State of Ohio would follow the example set by the council of Mansfield, they would take a grand step in the direction of getting rid of quacks and imposters which infest all our large cities. This plan has been tried in Kentucky, and, so far, has proved to be of great advantage in getting rid of these leeches, and should be followed by all the States that have no special laws or cannot get special legislation to remedy this great evil.—*Texas Health Journal.*

We hope every city will do exactly the same thing. Run out the quacks! If not by one method, then by another.

WE call special attention to the advertisement of Dr. W. C. Abbott, of Ravenwood, Chicago, Ill. The doctor makes the manufacture of Dosimetric Granules a specialty, and he has gained for himself quite a reputation. You will see in his advertisement that he makes several tempting propositions.

IT has been decided in Germany that the destruction of the fœtus before labor sets in is not murder. This seems only to lend a helping hand to crime. Heretofore the destruction of fœtus has not been at all common, but with such a law as this the reverse will soon be noticed.

OUR readers will see in the advertisement of Messrs. Park, Davis & Co., that they offer to furnish free, to any physician that will send them their name and address, samples and literature of their special preparations. This house is probably the largest of its kind in this country, and we take pleasure in saying to our readers that it is certainly one of the most reliable. Their Soluble Elastic Capsules of Cod Liver Oil and Creosote for the treatment of Tuberculosis are among the newest of their products. Creosote is getting to be a very poplar remedy in the treatment of this disease, and its combination with Cod Liver Oil in this accurate and convenient form will certainly facilitate their use.

A HIGH POSITION.

WE quote the following from an address by Prof. Clifford Allbutt in the Lancet :

"An ideal position is that of the physician, to a certain extent only. He must not presume upon the liberties which his profession permits him upon the false assumption that they are accorded to him on account of his personal qualifications. Prof. Clifford Allbutt in the course of an address speaks as follows in this regard. We will not claim too high a place for our craft lest we be punished for our self-esteem ; yet to the physician whose unseen privilege it is to preserve a great leader or a great seer for the service of the State, or, in the life of the family, to restore the loved to the loving and to bind again the bond which death would have dissolved, there is no light honor, no small blessing; nor is it a small thing, passing beyond personal service, to restore to health

the tainted life of a community of men, to purify the wells of life or to arrest the march of a pestilence. But we bear a greater testimony than these. Is there not something more than the cure of disease, something more than purifications, something even more than the defeat of a pestilence to which we bear witness? Amid the conflict of religious sects, amid the the decay of creeds, even beyond righteousness itself, is there not arising a new idea of hunanity—of ethics springing rather from mutual sympathy and tenderness than from moral codes or supernatual sanctions? Are not our eyes opening to see in this humanity, in the revelation of that higher life which is found by losing ourselves in others, the essence of the gospel of Christianity; and if we are true to the best work of our calling, are we not ministers of the new and fruitful hope? To regard the individual conscience is to regard a dark, an unstable, even a whimsical, standard; but to form from day to day higher and higher conceptions of human ideals and of human service is to set forth and to strengthen the ethics of the future, and to this work we also are called. We are concerned more or less directly in the solution of many social problems which may be solved this way or that, but the issues of which are of grave consequence to ourselves and to our children, and will bear good or evil as they come into accord with the higher or the lower impulses and tendencies of modern civilization.

EDITORIAL BRIEFS.

A Happy New Year.

Typhoid fever has been epidemic in St. Louis for the past few months.

The latest remedy for cold hands and feet is dilitation of the sphinctes-ani.

A medical college has been opened in Chicago with night lectures only.

The Ohio Medical University recently opened with over one hnndred students.

See advertisement of the Dietz Lamp. It burns kerosene, gives a white light and never goes out. It is the best buggy lamp in market.

Cooper Medical College has adopted a four years course as necessary for graduation.

The Times & Register devotes its issue on December 10th to the subject of hemorrhoids.

Russia is soon to have an inebriate asylum. Speaks well for Russia by not needing one earlier.

The Brazilian's coffee to be good must be "black as night," "bitter as death" and "hot as hell."

The number of medical students from the German Empire universities numbered 8,838 last summer.

One thousand and nineteen medical students attends the University of Dorpot, Russia. A large class.

Anta-pa-rena has no bad effects. Indicated in all cases of fever and other affections where pain is present.

Read our advertisements. It will pay you. Every firm that advertises in this journal we guarantee to be reliable.

Dr. John Ridlow has been appointed Professor of Orthopœdic Surgery at Post Graduate Medical School of Chicago.

Dr. A. Whitehead has resigned the chair of anatomy and clinical surgery in the Baltimore University Medical School.

Wheeler Tissue Phosphates are unexcelled by any on the market. 'Tis a great remedy to build up the constitution wasted by phthis.

The *American Lancet* states that a recent Supreme Court decision is to the effect that a physician's library and instruments are exempt from execution.

Forty-one per cent. of the applicants before the Alabama Medical Examining Board are rejected It is either a very high-graded medical board or a poor grade of applicants.

Notice the advertisement of the Antiæostine Chemical Co., of Newton, N. C. Their preparation is certainly a fair one, and we hope our subscribers will take advantage of it.

On November 10th the Syms' operating building was open to the inspection of the medical profession by the Trustees of Rosevelt Hospital. Two hundred thousand dollars was expended in the construction and outfit.

It is reported that no less than 20,000 persons in St. Louis habitually practice hypodermic injections on themselves. The great majority being women of the well-to-do classes.

A new medical Journal, by the name of the New York Therepeutic Review, will begin with the new year. And still they come. Medical journals in the United States are like the number of Drs. in Charlotte—numerous.

The reminiscences of the life of Dr. Holmes, which are now being prepared, may not be published during his lifetime. We would like very much to read this book real soon, but we do not wish Dr. Holmes an early departure.

At the recent examination held at the army headquarters to fill vacancies only four out of the twenty-two who appeared before the board succeeded in filling the rigid requirements, professional and physical, for appointments as Assistant Surgeons.

We Have received from Wm. Wood & Co. a large picture of Professor Bilroth's Clinic. This is but one of a number of subjects intended for office walls. For information concerning prices and subjects write to Wm. Wood & Co., New York City.

Water famine is reported in Trinidad, port of Spain. It has a population of 40,000 people and scarcely enough water can be obtained for drinking and cooking purposes. 'Tis said that by a little expenditure sufficient water supply could readily be attained, but it looks like those people are peculiarly stingy or very hopeful in God surely.

In Michigan, says the Review, they assess a dog $1 for being a dog. In Tennessee they assess a man fifty cents for being a doctor. It costs half a dollar more to be a dog in Michigan than a doctor in Tennessee. Don't be a dog. In St. Louis it costs $3 for being a dog and nothing for being a doctor, so that the dog still keeps ahead, only more so.

The City of Dallas and Eighteen of Her Aldermen.—The Texas Health Journal gives a short history of Dallas, her past and her supposed future. The pictures of eighteen of her aldermen are given in the history, and among them we see the genial and happy face of Dr. Briggs, the editor of the Texas Health Journal.

A Texas brother sends his card to the editor, says the Kansas City Medical Index. It is sufficiently unique to reproduce; "Q. Cincinnatus Smith, M. D., General Practioner of Surgery and Medicine, Austin, Texas, Office: 617 Colorado St., Masonic Temple, first floor, room 3; residence 1507 Colorado St. Life Foundation Fellow Society Science Letters and Art, London; Life Fellow American Association Advanced Science; Life Member California Academy Science; Active member New York Medico-Legal Society, etc., etc."

Books Reviewed.

A Manual of the Practice of Medicine. Prepared Especially for Students. By A. A. Stevens, M. D. 12 mo., pp. 501. Illustrated. Philadelphia: W. B. Sanders, 1893. Price $2.50.

This work is intended as a guide for the student in his general reading and bedside work. In its make-up it is most complete, giving the facts in the various diseases in a clear and lucid manner. It contains much more than a work of its kind generally considers. The author being instructor in Physical Diagnosis, we naturally have the symptoms clearly and fully given. The concise manner of treatment is one of the beauties of the work, leaving out the different theories and specifics of various teachers. We are most favorably impressed with the book and trust that it will meet a warm reception at the hands of all who read it carefully.

The Physicians' Visiting List. P. Brockiston, Son & Co. Price $1.

The publication of any book for forty-two years is the highest recommendation that can be given it for its usefulness and popularity. It contains many tables that are very useful—tables for calculating the period of pregnancy; tables of the metric system, which is growing in popularity every day; tables for converting apothecaries' weight and measures into grains; posological table, dose table; poisons and their antidotes; a list of new remedies; rules for examining urine and other useful information. It is arranged in a most convenient size, and the entering of visits, consultations, etc., is very simple. 'Tis a handy little book for everyday use.

International Magazine Visiting List.

This little book is published by J. B. Lippincott Company. It is arranged for thirty patients a week. The first part is occupied with dose tables and other useful pocket memoranda. It contains

cash accounts, obstetrics, &c. In size it is better than some others. It is bound in flexible covers and convenient to carry around.

Eleventh International Medical Congress.

(Rome, September 24th to October 1st, 1893.)

The American Sub-Committee has the following membership: W. T. Briggs, Nashville, Tenn.; H. P. Bowdich, Boston, Mass.; S. C. Busey, Washington, D. C.; C. Cushing, San Francisco, Cal.; N. S. Davis, Chicago, Ill.; A. Jacobi, New York, Chairman; Norman W. Kingsley, D.D.S., New York; Wm. Osler, Baltimore, Md.; William Pepper, Philadelphia, Pa.; F. Peyre Porcher, Charles-S. C.; Chas. A. L. Reed, Cincinnati, O.; D. B. St. John Roosa, New York; Alex. J. C. Skene, Brooklyn, N. Y., and James Stewart, Montreal, Can.

The Secretary General informs the Committee, that the French Railway Company has offered to the members of the Congress a reduction of fifty per cent. on its fare.

Science and Women.

Professor William James, of Harvard, announces that woman develops early and then ceases to grow mentally. Professor Crichton Browne finds that women's brains are smaller than men's, and their frontal lobes less richly supplied with blood. Professor Lombroso finds that women are less sensitive than men, and, as regards their receptive and perceptive organs, represent an incomplete developed type. Altogether, science is bearing down very hard on the ladies. Yet we do not learn that they are becoming any less the popular. The poet has said metrically that without them the extremes of life would be without solace and its middle without joy. The testimony of the poet will probably continue to be received by the mass of human kind, even if the greatest cranial circumference of the gentler sex never rises above fifty centimeters.—*Review.*

Tritica is one of those remedial agents with which every physician should become acquainted. Send to the manufacturers for literature.

Selections.

Alkaloidal Therapeutics.

A Paper Read before the Miami Valley Medical Society, at Loveland, Ohio, October 24th, 1892.

By otto juettner, a. m., s. m., m. d., cincinnati.

The principle of self-preservation has in the mind of every progressive and independent physician long ago answered affirmatively the question whether it is right and justifiable to dispense remedies to the excluslon of the druggist. Close scrutiny of all sides of the subject, however, has taught us that it is not only the purely utilitarian reason which makes it desirable to do without the retail apothecary. I have had occasion to emphasize this point in a paper recently published in the Lancet-Clinic, Sept. 24, '92. Inasmuch as in the eternal fitness of things the physician who is his own pharmacist is more in keeping with the spirit of scientific exactness which characterizes the age we live in, it is surprising that there should be so few who have made the ever-ready, ever-reliable medicine case their constant and indispensable companion in practice. I am inclined to ascribe this fact to the fear which many physicians entertain, of imposing upon themselves an incubus the advantages of which are over-balanced by the work which it causes and the time lost thereby. I wish to ask your indulgence, gentlemen, for the purpose of demonstrating to you the details of a method which has been eminently satisfactory to me, combining, as it does, the advantages of simplicty, adaptability, physiological efficacy and scientific correctness.

The close relationship which modern therapeutic science has established between physiology and therapy, has reduced the study of the physiological action of drugs to the study of their essential or active principles. The therapeutic treatment of disease has thereby become more correct in principle, less complex in method, and decidedly more certain in effect. This fundamental fact suggests at once the administration of active principles, pure and simple, as the method which rests upon a strictly physiological, *i. e.*, the essentially correct basis. If only one-tenth or one-hundredth of the bulk of a certain drug represents, the one agent from which we expect certain physiological results, it is, to say the least,

unnecessary to administer the remaining nine-tenths or ninety-nine hundredths. The scientific therapist eliminates from the whole bulk the one agent desired, and administer it minus the mass of alien material from which it was extracted. The credit for having practically and systematically applied this principle belongs to Burggreave, the distinguished Belgian, than whom there is no greater authority on physiological therapeutics living to-day. He is the father of alkaloidal therapeutics.

Burggreave's list of therapeutic agents, comprising alkaloids and a few mineral salts of decided physiological efficacy, covers the whole territory of the materia medica. It forms a magnificent array of active remedies which are small in bulk, but mighty in their action. In order to render his method as easy of application as it is correct in principle, Burggreave conceived the idea of incorporating a certain fixed quantity of any of his alkaloids or salts in a granule of small size. This idea of definite dosage suggested to him as an appropriate appellation for his method the name of *dosimetric* system, by which it is now generally known.

It would be a serious error to look upon dosimetry as an innovation or schism like homœpathy or eclecticism. It is nothing more or less than our old materia medica boiled down to its physiological substance. It is, therefore, without a doubt, more strictly scientific, and must be as an adjunct to practical medicine more satisfactory. Let us now see its *modus operandi* in the hands of the physician who dispenses his own remedies and wishes to save as much time and labor as possible.

If we compare the long list of remedies and their different preparations in the U. S. Pharmacopœia with the number of remedies and their preparations which we have accustomed ourselves to prescribing, we are struck by the complexity and length of the one, and the simplicity and brevity of the other. Probably thirty different preparations represent more than the whole sum and substance of remedies which we ever think of prescribing. If we translate this comparatively short list into dosimetric language, we have an *armamentarium therapeuticum*, an amply sufficient supply of which can be conveniently carried in a medicine-case not larger than the ordinary surgical pocket-case. An outfit of dosimetric granules is, therefore, the very embodiment of *multum in parvo*, or a maximum amount of substance in a minimum amount of space.

I will endeavor to briefly outline the dosimetric system in its practical application. A list of thirty different dosimetric remedies is fully sufficient to meet the wants of general practice. This list contains alkaloids of many familiar drugs. In addition to these, we have at our command a number of active principles and powerful salts which outside of dosimetric practice are scarcely ever thought of, although some of them are of the greatest therapeutic value. The familiar and most important alkaloids are aconitine, apomorphine, atropine, caffeine, cocaine, codeine, digitaline, ergotine, hyoscyamine, morphine, pilocarpine, quinine, santonin, sparteine, strychnine and veratrine. These alkaloids are administered in the form of small granules, each granule representing a certain fixed dose of the drug. The granules of digitaline, for instance, contain one milligram or gr. $\frac{1}{67}$ of the alkaloid. If we wish to administer three milligrams of digitaline (=gr. $\frac{1}{22}$), we give three granules, and so on. Among the less familiar but equally valuable alkaloids are brucine, a most excellent nerve tonic for children; cicutine, a valuable sedative and anti-spasmodic; emetine, a good expectorant and emetic; colchicine, equal to sod. salicyl. in rheumatism; quasseine, a splendid stomach tonic; agaricine, almost a specific in the night-sweats of phthisis; aspido-spermine; highly recommended in the various forms of asthma; and strophanthine, a heart tonic par excellence. Among the salts, metallic and alkaloidal, we have calcium sulphide, lauded in diphtheria, also a useful internal remedy for catarrhal discharges like leucorrhea, and credited with the power of preventing suppuration in glandular swellings; calomel, the *pulvis mirabilis* of our forefathers; the arseniate of iron, combining the restorative and alterative power of arsenic with the hæmatopoietic effect of iron; quin. hydro-ferro-cyanite, a most excellent substitute for the disagreeable sulphate; the arseniate of strychnine, according to Burggreave, the best stimulant tonic known; the arsenite of copper, than which there is no better intestinal astringent; the mono-bromine of gold, by the prolonged use of which many cases of epilepsy have been benefitted. Many a therapeutic gem that was buried in the dark, unfathomed caves of the old materia medica was unearthed by the alkaloidal method. There is a certainty, a feeling of assurance accompanying the intelligent administration of the alkaloidal remedies which is a delightful relief from the suspense and uncer-

tainty of the old way. Or could any of us, however thorough our erudition and orthodox our faith, deny that there have been moments in which the spectre of skepticism haunted us, and the belief in our craft shook in its very foundation?

The dosimetric materia medica places into our hand agents that are new and unappreciated. As an example I might mention the arseniate of stychnine. In a case of typhoid fever, characterized by the prostration of the vital forces which in itself means danger, not to speak of high temperature, coma-vigil and other alarming features of a severe case, no tonic, no stimulant, no supportive agent will fill the bill with such promptness and decision as the arseniate of strychnine. Burggreave was wont to say hyperbolically, that the only thing arseniate of strychnine would not do, was to bring a dead person back to life.

The arseniate of copper is another agent that deserves to be known and appreciated more widely than it is. As small a dose as the thousandth part of a grain, repeated a half dozen times, will act as efficiently in a case of diarrhœa as a full dose of bismuth and opium. To show its wonderful action in cases of chronic diarrhœa in subjects of advanced age, let me quote you a clinical example. Not very long ago I was called to see an old soldier who had been troubled with attacks of diarrhœa ever since the war. Within recent years his attacks had become more severe and more protracted. He was stricken down with one of his periodical spells of sickness last August, and remained under the care of two physicians of unquestionable ability for two weeks. When I was called to see him I found myself confronted with a desperate state of affairs. He had evidently been freely dosed with opiates, for his pupils were contracted, his breathing was heavy, his senses benumbed. His anus was sore from the evacuations and the frequent use of astringent enemata. In spite of treatment the diarrhœa had continued with unmitigated severity. The outlook was certainly not encouraging. I ordered the patient surrounded with hot bottles and administered

Spir. Frum..... ..... ℥ss

subcutaneously. Then I ordered zinc. sulpho-carbol. gr. 1-6 and cupri arsen. gr. 1-1000 every ten minutes until twenty doses had been given. Two hours after the first granule of cupri arsen. had been administered the diarrhœa stopped, and there were no more

stools for forty-eight hours. On the third day the patient had an ordinary, non-offensive alvine movement. Within a week he was up and about. The wonderful effect of cupri arsen., preceded by a reliable disinfectant, like the sulpho-carbolate of zinc, in cases of summer complaint, is frequently a revelation.

There are many more alkaloidal remedies that are eminently reliable in their action, like agaricin, aspido-spermine, glonoin and many more. But it was not really my object at this time, gentlemen, to elaborate upon the value and action of dosimetric preparations, but rather to speak of Burggraeve's system as a ready method of dispensing our drugs. Dosimetry will delight the heart of every medical man who, like myself, looks upon materia medica as a ballast of chaff, with comparatively few grains of wheat scattered through it. We all within our hearts know that the *vis medicatrix naturæ* is to us in not a few instances a more powerful and more reliable ally than nine-tenths of the uncertain empirical stuff contained in the pharmacopœia. Dosimetry places into our hands the means, pure and simple, of producing positive physiological effects. Therefore, to the intelligent physician, it speaks its own eloquent panegyric.

The granule form of dosimetric remedies reduces the inconvenience of dispensing to a minimum. In addition to this the small size of these granules makes it possible for the physician to carry in an ordinary pocket medicine-case a large supply of all kinds of remedies. With our patients, from a purely psychic standpoint, the use of these granules is invariably an unqualified success, especially if we take pains to add a few words of explanation in order to disabuse their minds of homœopathic ideas. The facility of medicine-taking and the absence of the disgusting taste, nauseating odor and sickening appearance of the average bottle-medicine will be gratefully appreciated by intelligent patients. However, if a patient imagines that all salvation must come out of a bottle, the dosimetric physician will not be at a loss to know how to contribute to the comfort of his patient's soul. Dosimetric granules being readily soluble in water, a mixture is easily made. If we wish to combine different remedies we can enclose the required number and kind of granules in a capsule or make a solution of them. Individual taste, judgment and experience usually shape our methods and habits so that specific and detailed instructions

concerning the way of conveniently and successfully dispensing alkaloidal preparations are quite unnecessary.

Let me conclude, gentlemen, by saying that besides all the practical advantages which it offers, the dosimetric system will teach and compel us to make accurate and well-defined diagnoses, to think physiologically, to study the action of our remedies, to critically analyse changes in the condition of our patient—in one word, it will make better physicians of us. The old fogy, whose conservatism makes him look with suspicion upon progress of any kind, will remain in the jog-trot rut of fifty years ago. The progressive physician will advance with the onward march of science and knowledge. His every action will be consecrated by the spirit which make Gœthe's lost words "Mehr Licht!" the pass-word of the Aristotles and Humboldts of all ages. To the progressive physician only a little experience and practice will demonstrate the scientific correctness, practical adaptability and general excellence of Burggraeve's method. The common sense of the American physician justifies me in saying that the final and general adoption of dosimetric therapeutics is only a question of time.

471 Elm Street.

[We again call the attention of our readers to the granules furnished by the Philadelphia Dosimetric Co. They are as nearly perfect as it is possible to make them.—EDS.]

New Digestive Agent.

Another new Pepsin, this time one that is inodorous and entirely free from septic contamination, has just been announced. The manufacturers (Sharp & Dohme, of Baltimore, Md.) claim that it is the purest and most active Pepsin ever introduced, and as they offer to send samples of Webber-Pepsin S. & D., standard 1 to 6,000 to our readers upon application, these statements can readily be subjected to a critical examination and be proven or disproven according to actual existing facts.

Careless Prescribing.

The Chicago *Evening Journal* editorally attacks physicians for careless prescription of morphine. It continues, however, to advertise nostrums containing opium, which are more fertile sources of the habit than prescriptions.—*St. Louis Medical Journal.*

Medical Education in Turkey.

There are five medical schools in the Turkish Empire. One at Constantinople, one at Cairo, one at Aintab in North Syria, and two at Beyrout, one of the latter being Protestant, and the others Roman Catholics. Only the Constantinople and Cairo institutions possess the right of granting license to practice, the other three, which are in the hands of missionaries, can only give certificates of study, candidates having to go to Constantinople to be examined. The diploma conferred at Cairo gives only the right to practice in Egypt; if the physician who has obtained a diploma at Cairo wishes to practice in other parts of the Turkish Empire, he must pass a further examination at Constantinople. The medical school of Constantinople was founded in 1883, and until now has educated some 1400 practitioners, the teaching staff comprising twenty professors and the curriculum is of six years. The Protestant medical school of Beyrout has been in existence about twenty-two years, during which time it has educated 105 practitioners; there are six professors, and the length of the curriculum is four years; the other two schools are organized on a similar basis.—*Medical News.*

Eliot (Gustavus) on the Specific Treatment of Typhoid Fever.

The form of specific treatment of which it is my purpose to speak embraces the use of calomel, in connection with the tincture of iodine and carbolic acid. This method of treatment was described by Dr. James C. Wilson before the College of Physicians of Philadelphia, on January 3, 1883, as one which he had employed during the preceding year, and a brief account of it was published in the Medical News for January 20, 1883. Bartholow, as stated by Wilson, had previously used the following prescription:

℞ Tinctuæ iodini. ..... ʒ ij
Acidi carbolici ..... ʒ j
M. Sig.: Two or three drops three times a day.

Wilson used the same combination, giving one, two or three drops every two or three hours through the day and night. He also prescribed from seven and a half to ten grains of calomel, to be taken every second night until three or four doses had been taken.

It is my practice, in commencing a case of enteric fever to direct

that the patient take ten grains of calomel every other day until four doses have been taken. I also order a mixture which contains one drachm of carbolic acid and a sufficient quantity of tincture of iodine to make four drachms, and direct that four drops of this, in a wineglassful of cold water, be given to the patient every four hours. For children smaller doses are of course prescribed.

The remainder of the article is a discussion of the disease in a general way. The writer calls special attention to the importance of a prompt diagnosis and an early commencement of treatment. —*New York Medical Journal, August 6th, 1892.*

Diploma-ed Dangers forms the subject of an editorial in Daniel's Texas Medical Journal. After some preliminary remarks our contemporary goes on to say: The foregoing reflections have been suggested by reading in the Kansas City Medical Index the report of a case where a child *seven months old* had received a scald on the arm and cheek, for which, "Dr. C." (who reports the case!) prescribed "Carbolic acid, camphor gum, aa one drachm; to castor oil one ounce;" and gave one-eighth *grain of morphine*, and left another one-eighth grain, "to be given in two or three hours if necessary." The reporter says: "*The child dropped to sleep and died in about three hours without awaking*," yet as coolly attributes the death to the carbolic acid, and discusses the probability of its having been absorbed!

We do not know which to admire most, the doctor's child-like, ignorant simplicity, or his assumption that everybody else is as big a fool as he; for it is evident that *he* never suspected the overdose of morphine had done its work, or he would not have given it away. It is a remarkable report.

This is not the worst part of the affair. The author—C—of the wonderful report alluded to by the Texas Medical Journal asserts that the mixture he put up is campho-phenique and that the latter is consequently poisonous. This is not only uttering a falsehood, but it is a piece of malice which we certainly would not expect the editor of the Index to countenance or foster in any manner. A letter of correction calling attention to this affair and addressed to the editor of the Index received scant notice, not being even published.—*Saint Louis Medical Journal.*

Very Rare Indeed.

It is a rare thing for a human being to have three sets of teeth and seldom that a baby is born with teeth; but a growth of teeth after death is, perhaps, the most odd of all such freaks. A case of this kind is reported from Cincinnati. Some time ago, the body of Mrs. Catharine Davis was exhumed for removal. She died in 1852, aged thirty-nine years before her death. The coffin, when opened revealed the features in a perfect state of preservation, but, beyond this, and much more to the astonishment of the assembled relatives, the half-opened mouth seemed almost smiling with a full and nearly perfect set of teeth of quite an inch in length.—*Exchange.*

What kind of soil is that which grows teeth an inch long in the mouths of dead people? No one has yet been able to produce them in the edentulous jaws of living persons, but here are all the minute particulars of a full set developed after death. What excuse has the editor of a grave professional journal, supposed to be published for educational purposes, for inserting such a roaring absurdity as that? Is he credulous enough to believe it to be a scientific fact, and if not, what reason can there be for the repeating of such a preposterous yarn?—*Dental Practitioner and Advertiser.*

What we desire to know is what kind of soil it is which can grow such monumental liars, as the author of the tooth item given above?—*Review.*

A Rare Aural Complication of Gonorrhœa.

Fischel (Prager Medicin, Whochenschr., No. 11, 1891). reports the following case: About the twenty-second day of the gonorrhœal attack, the patient, age twenty-four, was taken with chills, and developed left-sided epididmitis. Two days later appeared a very severe headache and troublesome tinitus. The following day he became totally deaf in both ears. M. Habermann, who examined the patient with the writer, confirmed the diagnosis. The ear trouble was due to gonorrhœal infection. The revulsion and diuretic treatment materially improved the hearing in a few days. —*Brooklyn Medical Journal.*

Abstracts.

A Modern Method of Medication.

Among the many methods of administering medicaments, the soluble elastic gelatin capsule is growing to be one of the most popular. There are many efficient but unpalatable medicaments which may be readily exhibited in this way without offending the palate of the most sensitive patients, and capsules are much easier to swallow and more soluble than pills. Few physicians are aware of the many medicaments that are now administered in this way. Among these one need only mention the following to indicate the wide application of this method of giving numerous drugs: apiol, balsam, fir, balsam Peru, cascara sagrada, castor oil, castor oil and podophyllin, chaulmoogra oil, cod liver oil, cod liver oil and creasote, cod liver oil and iodine, cod liver oil and iodoform, cod liver oil and iron, cod liver oil and phosphorus, copaiba, copaiba and cubeb; copaiba, cubeb and buchu; copaiba, cubeb and iron; copaiba, cubeb and matico; copaiba, cubeb, matico and sandal; copaiba, cubeb and sandal; capaiba, cubeb and sarsaparilla; copaiba and iron; copaiba, cubeb and turpentine; copaiba and sandal; creasote (beechwood), 1 minim; eucalyptus oil; gurjun balsam; linseed oil; liquor sedans; male fern and kamala; nitroglycerin, 1-100 grain; oil of pennyroyal; pichi extract; salol; tar, purified; valerian oil; Warburg's tincture; wintergreen oil; wormseed oil; quinine muriate and sulphate. Of extra sized elastic-filled gelatin capsules there are castor oil 2½ to 15 grammes; cod liver oil, 2¼ to 15 grammes; male fern and castor oil; santonin and castor oil. Messrs. Parke, Davis & Co., were among the first to make this method popular, and will be pleased to afford physicians interested all desired information concerning this agreeable method of medication.

The first quinquennial prize of $1,000, under the will of the late Samuel D. Gross, M. D., will be awarded in 1893. The conditions annexed by the testator are that the prize "shall be awarded every five years to the writer of the best original essay, not exceeding 150 printed pages, octavo, in length, illustrative of some subject in surgical pathology or surgical practice, founded upon original investigations, the candidates for the prizes to be American

citizens." It is expressly stipulated that the successful competitor shall publish his essay in book form, and that he shall deposit one copy of the work in the Samuel D. Gross Library of the Philadelphia Academy of Surgery. The essay, which must be in English, should be sent to Dr. J. Ewing Mears, 1429 Walnut street, Philadelphia, before June 1st, 1893. Each essay must be distinguished by a motto, and accompanied by a sealed envelope bearing the same motto, and containing the name and address of the writer. No envelope will be opened except that which contains the successful essay. The committee will return the unsuccessful essays if reclaimed by their respective writers, or their agents, within one year. The committee reserves the right to make no award if the essays submitted are not considered worthy of the prize.—*Medical Standard.*

Double Penis—Absent Anus.

Dr. J. F. Pratt ("Med. Sum.") of Binghampton, N. Y., reports the following case: A II-para was delivered of a child which above the umbilicus was normal. Encircling that point was an opaque membrane which resembled the peritoneum. It was about two inches in diameter, and terminated rather abruptly in healthy skin. From the right hypochondriac region emerged the transverse colon, and crossed the abdomen externally to the left hypochondriac region, where it entered the abdominal cavity. In the center of the abdomen, and just above the pubic arch, emerged the rectum, which curled up in the direction of the umbilicus, forming nearly one-half of a circle about one and one-half inches in diameter, where it terminated with a circular opening, without a sphincter. There was no trace of an anus; the skin covering the site was perfectly normal and smooth. In either groin was a scrotum and penis. The one on the right side was more fully developed; through it the urine passed. The one on the left was a little smaller, and through the penis, at intervals, blood passed. The thighs sprang from the body at nearly right angles, which was the occasion of the obstruction during labor. From the knees to the ankles the legs passed downwards and inwards nearly to a line drawn through the center of the body. There was double talipes varus and spina bifida. The child lived six days. Although it did not nurse, it swallowed naturally, and was fed at regular intervals; but most

of the nourishment passed directly through undigested, and in consequence it died from ianition. The skin around the umbilical region took on healthy granulations, and healed about one-fourth of an inch in the direction of the umbilicus. The portion of the bowels that was external to the abdomen was granular in appearance, and remained unchanged.—*Medical Standard.*

Bleeding for Acute Articular Rheumatism.

M. J. Pallardy (*L'Union medicale du Canada*, May, 1892,) reports the case of a man, 60 years of age, suffering from a marked attack of acute articular rheumatism, in whom no benefit was produced under the alkaline, purgative, and anodyne treatment. The case was particularly a severe one, even the articulations of the fingers being deeply affected. A pleuritic effusion on the right side of the thorax was the source of a difficult respiration, the enormous and forcible action of the heart being similarly distressing. Seeing that the treatment referred to had been of no avail, the author proposed bleeding, which was gladly accepted by the suffering patient. Sixteen ounces of blood were drawn from the arm, the immediate effect being marvelous. The articular pains disappeared rapidly, and with the continued administrations of the alkaline and anodyne remedies during a week, the patient made a complete recovery. The same author refers to two other cases of the same disorder, occuring in individuals, 72 and 75 years, respectively, in whom the same happy results were obtained after other measures had failed to do any good. Pallardy claims that bleeding in such instances is soon followed by a diminution of the pains, and that it besides shortens the disease by a few days.—*Thera. Gazette.*

Treatment of Delirium Tremens.

Dr. Norman Kerr believes this disease to be due to the cumulative specific action on the cerebral tissue of the alcoholization of the blood, and that the best hope of cure consists in natural exhaustion inducing sound sleep, thereby avoiding the administration of alcoholic liquors and opiates, chloral, bromide of potassium and all narcotics. He reports a case exemplifying the differing results of narcotic and non-narcotic treatment. A patient, aged forty-eight, in his second attack, was treated with opium and the bromides,

and in his third attack only with liq. am. acet. In the former seizures, even after sleep, he was unrefreshed, and so violent that he had to be restrained by force until exhaustion procured natural sleep, his only beverage being coffee. In the later seizure, two years later, he was treated with liq. am. acet., at first in drachm doses every hour; milk, beef juice, broth, and coffee were frequently given. In about seventy hours he had a sound sleep for four hours, followed in four hours more by a sleep of twenty hours' duration. The recovery was quicker than in e second attack. —*Quarterly Journal of Inebriety.*

Are Hypodermic Injections of Morphine Lawful ?

A suit has just been begun, in South Dakota, by a Mrs. C. M. Sweitzer against a doctor living in Aberdeen. She alleges that the doctor repeatedly "pumped morphine into her husband so that he became a morphine fiend," and being intellectually and morally a wreck, was unable to provide for her support. The medico-legal questions involved in this suit are of considerable interest, as what is called the morphine habit is becoming one of the notable medical signs of the day. The facility with which hypodermic injections can be made, and their possible results when long continued, make it the duty of the physician to be careful when he adopts such a line of treatment.

Some of the newspapers are clamoring for a law placing some restrictions upon the administration of morphine, alleging that it is as dangerous as the sale of liquors to minors. Whether the consent of parents or husbands is necessary to make a hypodermic injection of morphine proper, is a question which has never been before a court for decision, but if heavy doses were given and continued for a considerable length of time, without informing the patient of the character of the treatment, and evil results followed, it is very probable that the physician would be liable in damages. —*Buffalo Journal.*

We have had an opportunity recently to examine the goods manufactured by the Tyer Rubber Co., and it is a pleasure to us to recommend them to the profession. Their combination water bottle and fountain syringe is certainly one of the most complete we have ever seen.

Typhoid Fever—Its Etiology, Pathology and Treatment.

BY J. FULTON PURDOM, M. D.

The etiology of typhoid fever practically requires no discussion. That the disease is due to a specific micro-organism, the typhoid bacillus, is an accepted fact. The only difference of opinion relating to the etiology would arise with regard to the manner of attack made by the bacillus in the human body, and as to what tissue constitutes its field of action; and yet there seems but little ground for controversy on this point, when we consider the fact that investigation has shown, almost from the beginning of the history of the disease, that all epidemics and most of the isolated cases can be traced to an infected water supply, which is conclusive that the bacillus must be swallowed; and in connection with this fact post-mortem does not show a constant lesion of the stomach, but has proven beyond question that inflammation and ulceration of the glands of the small intestines are the only characteristic lesions of typhoid fever. With these facts before us we unhesitatingly say the disease is due to the typhoid bacillus, which must be swallowed and pass beyond the stomach, and be taken up by the glands of the small intestine in an active state, and that the bacilli are powerless to produce the disease in any other way.

* * * * * *

The indications for treatment are clear. First, an antiseptic which will neither be absorbed by the stomach nor have its antiseptic properties neutralized by the gastric juice. * * * Antiseptics that are absorbed by the stomach need no comment further than to say they never reach the bacillus, and can be of service only in so far as they improve the condition of the stomach for the reception of nourishment. From clinical observation we are fully satisfied that Listerine in teaspoonful doses, repeated as required, improves the condition of the stomach for the reception of nourishment, and if all the Listerine is not absorbed by the stomach it assists the action of the intestinal antiseptics.

We are willing to be regarded as a strong advocate of the use of a reasonable amount of alcoholic stimulants from the beginning of treatment, believing that, alcohol being a diffusible stimulant, improves the assimilative functions and retards tissue waste by neutralizing to some extent the action of the ptomaine. The

necessary amount of alcohol can be determined only by its effect. When given in excess it will necessarily disturb the action of the stomach, and to that degree hinder the nourishment of the patient. At all times before taking anything into the stomach the patient should rinse the mouth with equal parts of Listerine and boiled water, for it renders him more comfortable and keeps the stomach in better condition.

His First Case.

In conversation with a very wealthy young man the other day, he related an experience with a recent graduate on whom the odors of commencement day flowers and the dissecting room were still fragrant. "While at my country place this summer I suffered severely with asthma. As you know, I have been under the treatment of doctors all over the world, and I know pretty well what will relieve me, and that is a hypodermic of morphine. My attacks always come on late at night, and of course I sent for the nearest doctor. The first visit is still pictured vividly before me now. There came a timid rap at the door, and on my impatient summons 'For God's sake, come in,' the blushing, beardless medico turned the knob the wrong way several times and finally waited for the door to be opened. I felt sure this was his first call. There he stood hesitating whether to back out or not, but finally stumbled over the sill and fell into my presence. In bowing to my wife his glasses fell off, and in picking them up he turned over a small table with some valuable china. If I had not been so sick I would have assured the poor fellow, but you know how I am when suffering one of these attacks. As I lay there gasping for breath and wheezing like a tow-boat, he felt my pulse and asked about my bowels. My patience as well as my breath were about exhausted, and between gasps I yelled out 'D–n—it—sir—don't you—see—? Give me a hypo—dermic—. Give me a grain, quick.' Warm water was ready for him in a glass which was handed him, and with some encouragement from my wife he tried to load his syringe. The tablet wouldn't dissolve; it looked as if his thumb and his fingers would never fill the syringe, and when finally, after numerous efforts, he accomplished the task, I thought he would never get the needle through the skin. The needle left a large blotch, which lasted several days and was very painful. Still, everything to the

contrary, I called him quite a number of times and the last visit he paid was quite a contrast to the first. He came in gracefully, with self-assurance, and the needle didn't leave a blotch. I know that I have started him on the right road, and that mine was a valuable experience for him.

"To conclude, with the knowledge that I was rich, he sent in a bill that would stagger some specialists, which I paid without a murmur."—*Practitioner and News.*

Medical Journals and Advertising are noticed in the Atlanta *Medical and Surgical Journal* in the following manner: The following advertisements we clip from the columns of an enterprising journal which claims to have a larger circulation than any other medical journal in the world. We submit that this is a disgrace to medical journalism which should be an exponent only of that which is conscientious, professional and honorable in thought and conduct.

First understand then show your appreciation.—Tilghman's method to influence the sex, by which you can obtain either male or female as desired, is nature's law discovered, and is thoroughly scientific; and the author knowing this, desires to give it to the physicians of this country. The method applies to both the human and animal families, and very many scientific stockmen are now using it with complete success and profit. Physicians as a rule, want it for the information gained. His price is $5.00, but it will be sent to physicians for $1.00. And this is to cover expenses. Address, etc.

Secrets of Physiology.—Control of offspring without medicine. Scientific work. Price, $5.00. To physicians, $1.00. Address, etc.

It is such advertising as this that degrades the journal containing it to the level of the local newspaper. We want to say, in passing, that there is in Georgia a country newspaper, the Fort Valley *Leader*, which keeps a standing announcement on its title page that it will publish no patent medicine advertisement. But here is a medical journal selling its space to arrant quackery, and circulating claims which are absolutely false; just for a little money —REVIEW.

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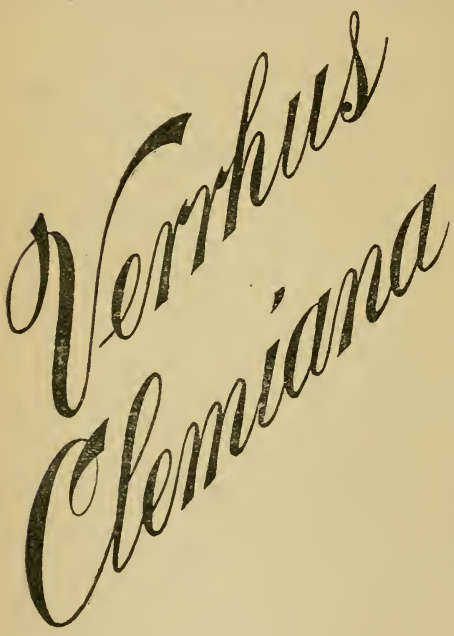
A Voice from the South.

THAT a greater variety of valuable MEDICINAL PLANTS are found in the SOUTHERN STATES than in any other section of this country, is a fact known to all physicians who have taken the pains to investigate the sources of our drug supplies. In fact, the South will hold her own, in this respect, with any other section of equal area in the world. She furnishes the principal laboratories of our own country with the bulk of their crude drugs, and even foreign manufacturers draw largely on her fields and forests for supplies of many valuable medicinal agents not found elsewhere. It is, therefore, not surprising that the discovery of a remedy that promises to revolutionize the treatment of Chronic or Constitutional Diseases (such as Syphilis, Scrofula, Rheumatism, Eczema, etc., etc,,) is announced from that quarter. The story of this discovery is charmingly told in a little book (for physicians only) entitled:



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Students prepared for their college, hospital, and State examinations. An average of 50 per cent. of the members of this quiz class are successful in securing hospital appointments.

Preparation for the positions in the Army, Navy, and Marine services a specialty.

A general direction of a student's studies from the beginning will be assumed when desired. Students beginning the study of medicine can, for a small extra charge, sign under Dr. Collins as their preceptor, and have all responsibilities assumed. Frequently young men coming to New York to study medicine waste a good portion of their first year by not knowing what to do and how to go about it. An experienced quiz master obviates this.

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Whether imaginary or real, this condition is scarcely less a source of annoyance to the physician than to the sufferer. The Bromides and Cannabis Indica in Neurosine very promptly relieves these cases, while the Bromide of Zinc seems to act as a permanent nerve tonic, and better results are obtained from the use of Neurosine than with any other single remedy.

Jambul in Diabetes.

I wish to thank you for a suggestion from you which I saw some months ago. You said you had found jambul good for saccharine diabetes. I had a case and was grasping for straws. Got some of Parke, Davis, & Co.'s jambul. The symptons commenced to disappear at once, and soon the thirst, excessive diuresis, and many other other unpleasant symptoms were gone. Since last month has taken no treatment, and eats whatever food she wants. It should be better known by the profession.—V. E. Lawrence, M. D., in *Philadelphia Times and Register.*

Aristol in Gynecology and Specific Lesions. Whatever triumphs Aristol has had, or may yet obtain, in traumatic injuries, burns, and the long list of lesions which daily come up for treatment in the varied field of minor surgery, it is best appreciated by practitioners who must promptly and successfully treat gynecological and venereal cases without allowing the patients to become objects of suspicion. Aristol gives uniformly good results in cervical erosions (recent or chronic), cervical and mammary fissures, vaginitis, vaginal fistulæ, and vulvar pruritus. It acts admirably as a dry dressing, or may be used, as in endometritis and fistulæ, in the form of crayons. Aristol is useful also in the ulcerative lesions of syphilis, in which it is applied after a previous washing with a 1-200 solution of sublimate. In chronic, pelvic peritonitis and pelvic cellulitis (with or without abscess) dry dressings of Aristol on absorbent cotton have given very satisfactory results. In these cases especially, where comparatively large surfaces are often to be covered and the dressings frequently renewed, or continued for long periods, the advantages of Aristol are especially apparent.

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Notice.

McArthur's Diary will be sent to any physician free. It is a useful little memorandum.

Eminent Medical Men Dead.

The deaths of Dr. Thomas Aitken, Edinburgh, Alfred Leech, M. B., M. R. C. P., Edinburg, Dr. Paolo Fiordispine, of Rome, and Dr. Henri Gueneau De Mussy, of France, have been reported within the last eight weeks.—*Am. Practitioner and News.*

The Elixir of Three Chlorides was an inspiration. It is a combination which has made a multitude of friends and gained a fast hold upon the profession. Not satisfied with this, the enterprising manufacturers of this preparation have offered another one which bids fair to rival the Three Chlorides in popularity. It is known as Henry's Tri-Iodides, both being made by Rentz & Henry, the well known chemists.

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As the Antipyrine Folks think the word ANTA-PA-RE-NA is on infringement on the word Antipyrine, we have changed the name of our remedy to AN-TA-PA-NA, leaving out the sylable RE. The medicine is still the same and will continue to be, and all our new literature will be printed that way, and as long as we have a supply of the old literature this notice will be pasted to every book and the labels will have the RE blotted out. When you want the medicine please call for AN-TA-PA-NA. Most respectfully yours, WESTERN CHEMICAL CO.,

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A New Professorship in the Jefferson Medical College.

At a meeting of the Board of Trustees held on Wednesday, November 30th, 1892, Dr. G. E. de Schweinitz, was, on the unanimous recommendation of the Faculty, elected Clinical Professor of Ophthalmology in the Jefferson Medical College.

At the time of election Dr. de Schweinitz was Professor of Ophthalmology in the Philadelphia Polyclinic and Lecturer on Medical Ophthalmoscopy in the University of Pennsylvania.

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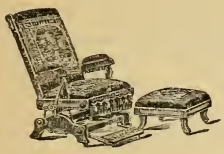

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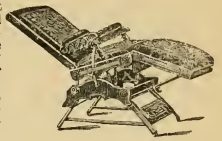

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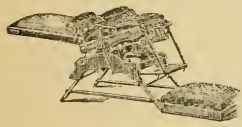
As a Gynæcological Chair it will take any position shown, or any intermediate position, besides having newly-patented improvements, which make it without doubt the best and cheapest Office and Gynæcological Chair in the World.

This chair can be converted from a splendid office chair (see cuts Nos 1 and 3) into one of the most complete Gynæcological chairs in one-half minute (see cuts Nos 2, 4 and 5).

No. 3.

This chair is sold with or without the Gynæcological attachment, as desired. It is unquestionably the most complete and comfortable reclining or lounging chair ever made. We make a special price to physicians, and also give them a handsome commission on all orders we receive through them for chairs for their patients. No chair in the world is so well adapted to ladies suffering from female weakness, and the commission we give on your orders will soon pay for your own chair.

SEND 2c. STAMP FOR SIX ELEGANT COLORED ENGRAVINGS.



No. 4.

Showing the chair in different positions and different styles of upholstering, etc.; also circulars containing splendid testimonials from nearly every State and Territory in the U. S.

REMEMBER.

This chair has nickle-plated attachments and adjustable stirrups. You cannot buy as fine a Gynæcological chair as this of any other reliable make for less than $70 or $100.

No. 5.

The chair can be rigidly locked in any position. Physicians should order at once, as the special inducements we are offering only hold good for a limited time.

Manufactured by P. C. LEWIS MANUFACTURING CO.,

Box 229. CATSKILL, N. Y.

The World's Antipyretic, Analgesic and Anodyne.

EXCELLENT in all kinds of Headache. SAFE and SURE. Relieves Sciatica, Myalgia, Hemicrania, Typhoid Fever, and troubles due to irregularities of Menstruation. Works like a charm.

ANTIDOLOR

A GRAND SUBSTITUTE FOR MORPHIA.

AN ENTIRELY NEW

COAL TAR DERIVATIVE.

Put up for Physicians in two forms—POWERED and 5 GR. TABLETS.

Samples of each sent on application.

Trade Supplied by United States and Canada Jobbers.

ANTIDOLOR CHEMICAL COMPANY, SPINGFIELD, ILLINOIS.

PRICE, PER OUNCE, 75 CENTS.

Anderson Antiseptic Vaginal Capsules

FOR THE LOCAL TREATMENT OF

DISEASES OF THE VAGINA AND UTERUS.

The most efficient and cleanly means of introducing remedies into the vagina. Antiseptic, perfectly soluble and reliable. Each capsule contains an absorbent tampon which may be medicated with any remedy indicated.

WHEN?

In all cases of acute and chronic inflammation of the lining of the womb, gonorrhoeal, syphilitic, purulent and leucorrhoeal discharges.
Relaxation of the uterine ligaments and weakening of the vaginal walls.
Falling of the womb. Ulceration of the osuteri.
Diseases of the ovaries and fallopian tubes.
Painful and scanty menstruation.
Where the womb is extremely irritable and neuralgic.

HOW?

Moisten the tampon with the remedy, draw it back into the capsule by means of the linen thread, replace cap and insert.

WHAT?

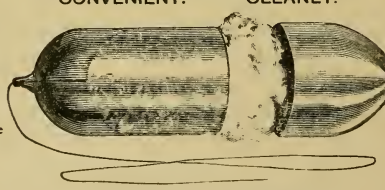
The result is a grateful relief to the sufferer and satisfaction to the physician. No handling of disagreable drugs; no loss of medication in the introduction, no soiling of linen.

THE VERDICT!!

RATIONAL. CONVENIENT. CLEANLY. EFFICIENT.

Three Sizes.

No. 1 Small
No. 2 Medium
No. 3 Large



Tampons.

Absorbent Cotton,
Oulo-Kutun (Wool and Cotton, or Wool,
as desired.

Exact size of No. 2 Capsule.

Any size by mail postpaid on receipt of price, 60c. per box.

VALUABLE AS A PESSARY.

Extract from a letter from Dr. A. J. Howe, Professor of Surgery, Eclectric Medical Institute, of Cincinnati, O.

"The Anderson's Vaginal Capsules charged with tampons of Oulo-Kutun are a convenient vehicle and medium for introducing pouches or medicated fluids into the vagina, and retaining them there. Astringent, sedative and antiseptic liquids may be thus employed, instead of the syringe as an implement, or a speculum."

Respectfully, A. J. HOWE, M. D.

☞ Send for printed matter containing valuable information.

THE HALL CAPSULE CO.

Manufacturing Chemists. CINCINNATI, OHIO.

Have you seen our "Ruby Capsule" for disguising the physical appearance of prescriptions, and for use when two medicines are to be taken in alternation? Send 10c. for trial box of 100.

Stramonium Stuffing.

The proprietor of a temperance hotel who suffered from asthma, used to smoke a mixture of stramonium and belladonna, which was kept in a jar in the pantry. Recently the cook, who was preparing a goose for dinner, by mistake went to the jar and took out a large handful of the mixture and stuffed the goose with it, believing it to be sage. All who ate of it had the characteristic symptoms of stramonium poisoning—and dryness in the throat, dilatation of the pupils, etc. They were relieved by emetics.—*Ex.*

GALVESTON, TEXAS, March 21, 1892.

F. SCHUMACHER, Esq., care American Cereal Co., Akron, O.:

Dear Sir—Your letter, also sample of Baby Food, duly received, for which please accept thanks. It is certainly something extraordinary. I have tried Mellin's, Horlick's Malted Milk, Carnrick's Prepared Food, and in fact almost every known baby food, as well as all kinds of condensed milk, but I have never seen a baby improve so rapidly as our little five-months-old boy did while he was fed on your sample. His cheeks became rosy, and he improved visibly in many other ways. If you will send me a lot of your circular matter, or any other kind of advertisement you may have, I will take pleasure in seeing that they are placed where they will do the most good. I feel so well satisfied with the result that I am willing to do anything to introduce it for you in this market.

Very truly yours, J. W. WEAVER.

Some one having reported that the Drevet Manufacturing Co., the makers of Chas. Marchand's Peroxide of Hydrogen, medicinal, was going to withdraw all advertising from medical journals, we recently called at the office of the great manufactory, 28 Prince street, and was greeted with the statement that they were renewing all the contracts on a three years' basis. This does not look like withdrawing, but does look like prosperity.—*New Eng. Med. Mo.*

Coca preparations are among the specialties of the Health Restorative Co. The leading neurologists endorse these, the restorative Wine of Coca in particular. Fabricide, another of their preparations, is an excellent Fabricide which is not debilitating in its effects and is at the same time a powerful anodyne. Send for samples.

Shall Success in Therapeutics be Imperiled by Ethical Considerations?

WASHINGTON, D. C., January 13, 1892.

To the Editor of the New York Medical Journal:

SIR—I have read and weighed the contents of the letter in your issue of December 19, 1891, on the subject: Shall Success in Therapeutics be Imperiled by Ethical Considerations? That certain points in this letter have made a profound impression upon me is the main reason why I now address you, and respectfully ask that my letter be published in the columns of the Journal in vindication of the honorable standing to which all good and true practitioners of medicine aspire.

Dr. Dodge states very clearly a point that is now appalling to every progressive physician—that in these days of advancement in the manufacture of pharmaceutical products we should no longer be confined, as were our forefathers, to prescribing drugs in their crude form, since there are to-day thoroughly attested remedies in palatable form which our patients can take without repugnance and with benefit.

Now, while the code of ethics is an admirable exponent of the tenets which are acceptable to the great body of practitioners in our country, yet it is at least a question open to discussion whether there are not some points which in our progressive age might be reconsidered and revised. And I would suggest as one subject for discussion the question of the approbation and recommendation of certain proprietary articles which are in almost daily use by very many of our ablest practitioners.

Why should those preparations be condemned simply because their manufacturers are protected under a registered trade-mark? Is it not perfectly legitimate for our medical societies to elect competent committees to be judges of the therapeutical value of tried proprietary preparations? And could not their recommendation also be secured by their indorsement—

1. In didactic and clinical lectures and private instruction given to medical students:

2. In original articles acceptable to the editors of recognized medical journals; and

3. In standard medical works?

I address you particularly on this subject for the reason that the readers of your journal have carefully observed the fearless manner in which you and your able associates have defended the worthy against the unworthy and given justice where justice was due. We have also seen that your journal has reviewed and commended works by other than medical writers. I have in mind the fact that the very excellent work on the therapeutical application of coca erythroxylon by Angelo Mariani, of Paris, France, the proprietor of the world renowned Vin Mariani, was favorably reviewed in your journal. WM. H. HAWKES, M. D.

Peroxide of Hydrogen in Intestinal Diseases.

Dr. Richards (Med. Neuigkeiten) has used this drug for twenty years. In carcinoma it removes the terrific odor, and in combination with tannin, it reduces the secretions. Amongst other cases, the writer communicates one of ulceration (strumous) of the sacrum, complicated with adhesion and ulceration of the lower portions of the intestines and profuse suppuration in the rectum. At the same time the patient complained of an intolerable pain in this region, such as the author had never witnessed. Here a ten per cent. solution of the peroxide of hydrogen, with tannine and dilute hydrochloric acid, gave the best results. Though the case ended fatally, the secretions and pain were easily controlled. In a case of chronic dysentery, with frequent dejections of thin, fetid stools, a solution of the remedy with tannine, injected high up into the intestine by means of a long rubber tube, once a day, produced at first discharge of pus or masses of pus and blood, and a cure in a short time.—*Med. Brit.*

American Orthopedic Association.

At the recent meeting of the American Orthopedic Association, held in the city of New York September 20, 21 and 22, 1892, the following officers were elected to serve for the ensuing year:

President, Dr. A. J. Steele, St. Louis; Vice-Presidents, Dr. Samuel Ketch, New York; Dr. Arthur J. Gillette, St. Paul; Treasurer, Dr. A. B. Judson, New York; Secretary, Dr. John Ridlon, 34 Washington street, Chicago.

The next annual meeting will be held in St. Louis the third week in September, 1893.

Cocillana—An Interesting Addition to the Materia Medica.

Respiratory inflammations always form a large proportion of the physician's cases. A Bolivian remedy which gives promise of much therapeutic efficacy is Cocillana, which was introduced a few years ago through the researches of Prof. H. H. Rusby, the eminent botanist.

Experiments were made with it by many medical investigators, who found its action very satisfactory in catarrhal inflammations of the respiratory organs, in coryza, hay asthma, bronchitis, acute and chronic, influenza and pneumonia.

It possesses also laxative and purgative qualities, and has been employed successfully as a substitute for ipecac and apomorphia in catarrhal conditions.

Parke, Davis & Co., who introduced the remedy to physicians, will supply reprints of articles affording information concerning its therapeutic application, and invite the medical profession to test its virtues further by clinical experiment.

They have after much difficulty obtained an ample supply of it, and will be glad to afford any facts desired concerning this or any other of their new remedies for respiratory affections.

The American Text Book of Surgery, edited by Professors Keen and White, of Philadelphia, which has only been issued a few months, is already a phenomenal success. It has been adopted as a text book by forty-nine of our leading medical colleges and universities. Nearly 5,000 copies have been placed in physicians' libraries, and every indication points to a sale of at least as many copies more in the next six months.

Dr. Nicholas Senn, of Chicago, is now preparing a Syllabus of Lectures on the Practice of Surgery, arranged in conformity with the American Text Book of Surgery, which will be a valuable aid to all who have this great book.

Every man has a paradise around him till he sins, and the angel as an accusing conscience drive him from Eden. And even then there are holy hours, when this angel sleeps, and the man comes back, and with the innocent eyes of a child looks into his lost paradise again, into the broad gates and the rural solitude of nature. —*Longfellow.*

A NON-TOXIC ANTISEPTIC.

FOR BOTH INTERNAL AND EXTERNAL USE.

LISTERINE.

Non-Toxic, Non-Irritant, Non-Escharotic-Absolutely Safe, Agreeable and Convenient.

FORMULA.—LISTERINE is the essential antiseptic constituent of Thyme. Eucalyptus, Baptisia, Gaultheria, and Mentha Arvensis, in Combination. Each fluid drachm also contains two grains of refined and purified Benzo-boracic acid.

DOSE.—Infernally: One teaspoonful three or more times a day (as indicated), either full strength, or diluted, as necessary for varied conditions.

LISTERINE is a well-proven antiseptic agent—an antizymotic—especially useful in the management of catarrhal conditions of the mucous membrane, adapted to internal use and to make and maintain surgical cleanliness—asepsis—in the treatment of all parts of the human body, whether by spray, injection, irrigation, atomization, inhalation, or simple local application, and therefore characterized by its peculiar adaptability to the field of

PREVENTIVE MEDICINE—INDIVIDUAL PROPHYLAXIS.

LISTERINE destroys promptly all odors emanating from diseased gums and teeth, and will be found of great value when taken internally, in teaspoonful doses, to control the fermentative eructations of dyspepsia, and to disinfect the mouth throat and stomach. It is a perfect tooth and mouth wash, indispensable FOR THE DENTAL TOILET.

Diseases of the Uric Acid Diathesis.

LAMBERT'S LITHIATED HYDRANGEA.

RENAL ALTERATIVE—ANTI-LITHI .

FORMULA.—Each fluid drachm of "LITHIATED HYDRANGEA" represents thirty grains of FRESH HYDRANGEA and three grains of CHEMICALLY PURE Benzo-Salicylate of Lithia. Prepared by our improved process of osmosis, it is INVARIABLY of DEFINITE and UNIFORM therapeutic strength, and hence can be depended upon in clinical practice.

DOSE.—One or two teaspoonfuls four times a day (preferably between meals).

The ascertained value of HYDRANGEA in Calculus Complaints and Abnormal Conditions of the Kidneys, through the earlier reports of Drs. Atlee, Horsley, Monkur, Butler and others, and the well known utility of Lithia in the diseases of the uric acid diathesis at once justified the therapeutic claims of LAMBERT'S LITHIATED HYDRANGEA when first announced to the medical profession, whilst subsequent use and close clinical observation has caused it to be regarded by physicians generally as a very valuable Kidney Alterative and Anti-Lithic agent in the treatment of

URINARY CALCULUS, GOUT, RHEUMATISM, CYSTITIS, DIABETES, HÆMATURIA, BRIGHT'S DISEASE, ALBUMINURIA, AND VESICAL IRRITATIONS GENERALLY.

Realizing that in many of the diseases in which Lambert's Lithiated Hydrangea has been found to possess great therapeutic value, it is of the highest importance that suitable diet be employed. We have had prepared for the convenience of physicians

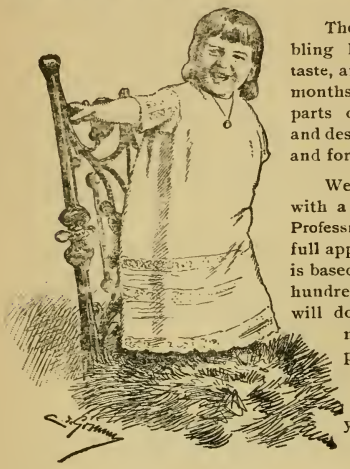
DIETETIC NOTES,

suggesting the articles of food to be allowed or prohibited in several of these diseases. A book of these Dietetic Notes, each note perforated and convenient for the physician to detach and distribute to patients, supplied upon request, together with literature fully descriptive of Listerine and Lambert's Lithiated Hydrangea.

LAMBERT PHARMACAL CO., St. Louis, Mo.

THERE ARE ONLY TWO PREPARED FOODS THAT WILL NOURISH A CHILD as PERFECTLY as HUMAN MILK. They are

CARNRICK'S LACTO-PREPARATA and SOLUBLE FOOD.



The former is an all-milk Food, closely resembling human milk in character, composition and taste, and designed for infants from birth to seven months of age, and the latter is composed of equal parts of Lacto-Preparata and Dextrinated Wheat, and designed for the remainder of the nursing period and for Invalids.

We make the statement at the head of this page with a knowledge of the general opinion of the Profession in reference to artificial feeding, and a full appreciation of what our statement implies. It is based on personal observation and actual test in hundreds of cases, and we hope that no Physician will doubt this statement without verifying it by making a trial of our Infant Foods as now put up in hermetically sealed cans

Samples will be furnished gratuitous if you desire to make a comparative test.

*KUMYSGEN

KUMYSGEN

Or Kumyss in powder form for making Liquid Kumyss in less than one minute, by simply dissolving the powder in water.

More nutritious and more palatable than any Liquid Kumyss.

There is no Food that equals it in all forms of Indigestion, Pulmonary Affections, Fevers, Vomiting in Pregnancy, Cancer of the Stomach and all conditions of the digestive organs where no food or even water can be retained. In Phthisis, it will increase weight and strength far more rapidly than Cod Liver Oil.

KUMYSGEN is incomparable as a **Food** where **easy digestion, high nutrition** and **palatability** are desired.

A pound bottle of **KUMYSGEN** will be sent any Physician prepaid on receipt of fifty cents, which is about one-third its retail price. **KUMYSGEN** is now put up only in bottles holding 20 ounces and 5 pounds.

KUMYSGEN is much less expensive than ordinary **Liquid Kumyss** to prescribe and its keeping qualities are perfect, while the latter spoils in a very short time.

*KUMYSGEN, when first prepared, was not relished by some patients, but, as improved, commencing with batch 200, it will please the most delicate palate

REED & CARNRICK, New York.

WHEATLAND, TEXAS, Sept. 29, 1891.

PARIS MEDICINE CO., ST. LOUIS, MO.:

Gents—In the ten years that I have been actively engaged in the practice of medicine, I have never, until now, written a testimonial to the value of any medicine; but such is the debt of gratitude I owe to FEBRILENE and the genius that formulated its composition that I deem it a plain duty to say that the life of our only child—a girl two and one-half years of age—was doubtless saved by using, at the eleventh hour, LYON'S TASTELESS QUININE in breaking up an attack of malarial fever of so obstinate a type that it set at defiance every other preparation of Chincona and its Alkaloids, available in such cases.

Every dose of Chincona Alkaloid given or injected in any and every combination was immediately ejected, and the fever had obtained such a hold that a fatal condition seemed imminent. At last I thought of FEBRILENE, a dose which I had never prescribed. Not one dose was ejected by the stomach, and after the third dose of 6 gr. preparation, a profuse diaphoresis occurred coincident with a rapid decline of temperature to subnormal, the comatose condition vanished and convalescence was rapid. I have since used it in my practice constantly, and with unvarying good results. As a febrifuge per se, as well as an anti-periodic, I consider it, for children, par excellence. Yours truly,

G. V. HALE, M. D. (Jeff.) LL. B.

A Tribute to the Medical Profession by Madame Nilssen, the Singer.

The London Lancet relates the following: Many years ago, so the story runs, the voice of this great artist, then in its childhood, which has held silent admiration so many audiences, was often exposed to the wintry weather of a northern home. On one occasion an attack of acute laryngitis had nearly extinguished it for ever, but the care afforded by a neghboring hospital preserved for latter times its still unawakened melody. The assistance then given was not unacknowledged, but a sum of £1,000 contributed towards the founding of a Parisian throat hospital attests to-day the gratitude of the illustrous singer and her sense of the priceless aid once rendered her by the medical profession.—*Age.*

On the Diuretic and Uropoietic Action of the Alkaloids of Cod Liver Oil.

BY M. J. BOULOT, AT THE FRENCH ACADEMY.

Seance du 15 *Nov.* 1892.

The remarkable studies of M. M. Gautier and Mourgues on the alkoloids of Cod Liver Oil, show us definitely the nature of the principles to which are due to a very great extent, its medicinal properties.

The physiological experiments made by these authorities on animals prove that the alkaloids referred to act :

1st. As stimulants of nutrition and of the circulation.

2nd. As diuretics.

In presence of such remarkable results explaining the therapeutic action of the oil, I have thought it possible to utilize in medicine the alkaloids themselves; besides it appeared to me interesting to enqire if the effects observed by M. M. Gautier and Mourgues, in their experimentation on animals and especially its action as a stimulant to the appetite and diuresis, were noticeable when exhibited in a human being.

Guided by this idea, I prepared some of these same alkaloids but in the present case I have not attempted to isolate them, and I have administered therefore the whole of the active principles of Cod Liver Oil as a medicinal unit.*

The dose administered to the mouth to normal subjects in 24 hours, varied from 15 to 25 centigrammes.

The analysis of the urine made before and after the administration of these alkaloids showed that:—

1st. The volume of urine voided during the 24 hours, as well as the amount of area, was considerably increased.

2nd. That it acted as a powerful stimulant to the intra organic oxidization, a fact already formulated in the conclusions of the original work.

From a clinical point of view the following are some of the

*M. Chapoteaut, in 1835, was the first to demonstrate that apart from the oil considered as an assimilable fat, there existed, in variable proportions, a number of alkaloids &c., and these he removed from Cod Liver Oil in the form of Morrhuol, representing all its acive principles.

results obtained on treating a number of patients with the active principles of Cod Liver Oil:

1st. Five young women with vague pains, loss of appetite, progressive decrease of strength, neurasthenia: The effects in the first place were increase of appetite. return of strength, with loss of the painful syptoms referred to. Three of them who had not menstruated for a considerable period were relieved of the suppression in a short time after beginning the treatment.

2nd. In the case of two children who were suffering from malnutrition, the appetite promptly returned in a few days.

3rd. Three patients who were afflicted with severe eczematous eruptions at each menstraul period, were cured of this trouble.

4th. In two cases of bronchial catarrh in old patients, the alkaloids produced the well-known effect of Cod Liver Oil, and were administered with advantge and perfectly tolerated.

These observations show that the active principles of Cod Liver Oil are of undoubted value as therapeutic where the oil is indicated.

Two Cases of Foreign Body in Lung.

Mr. W. J. Midelton records the two following interesting cases (Brit. Med. Jour.):

Case 1. *Pipe Stem.*—A man, in attempting to drive round a sharp corner in April, 1891, was thrown from his trap. At the time of the accident he was smoking a pipe. After the accident he was picked up insensible and found to have sustained a somewhat severe wound of the face. The pipe he had been smoking was searched for, but only part of it was found, and it was seen that a portion of the vulcanite stem was broken off. The patient was conveyed home and medically attended, having had in the meantime a sharp hemorrhage, presumably from the lungs. In due time he was able to resume his duties, but at times complained of pain and discomfort in the right lung. He always pointed to one spot in the front of the chest, and fancied he must have been bruised there. Careful examination with and without the stethoscope gave negative results. He also complained of a distressing spasmodic cough, sometimes lasting two hours, and on these occasions he said he felt as if a fly or something was tickling his throat. On one occasion he coughed up a plug of tough mucous,

roundish and about one and a half inches long. This circumstance was related to his medical advisers, but did not lead to anything. His case was diagnosed as gouty bronchitis. One day, nearly nine months after the accident, he coughed up a piece of pipe-stem, which proved to be the piece broken off the pipe at the time of the accident.

CASE 2. *Mutton Bone.*—The second case occurred in the practice of Dr. George Hunter, of Edinburgh. He has kindly written to me, and I cannot do better than quote his words. "Mr. J. M., while partaking rather heartily of mutton broth, felt something suddenly 'go the wrong way,' which caused some choky cough, but as nothing was seen, the incident, trivial in itself, passed by, and received little further attention. Some time subsequeutly he began to cough, and a patch of dulness, with increased fremitus, followed by moist sounds, was detected in one inlerscapular region. There was also hemoytysis of considerable amount during the course of illness. Forgetting, or perhaps laying but little stress on the chokiug incident, which I think was mentioned to me, I began to fear that my patieut was suffering from a pneumonic patch of tuberculous origin, when one day the symptoms resolved themselves by the appearance of a piece of mutton bone in the expectoration, which proved to be the *fons et origo mali.* I never published the case." Mr. J. M. tells me he retained the bone in his lung for one year.

These two cases, I think, seem to point to non-interference in the way of tracheotomy, etc., where foreign bodies are taken into the lungs; in each case the substance inhaled was large, jagged and caused distressing symptoms. Both patients are alive and in good health.—*Medical Review.*

Can you suggest an inscription to go over the gate of the new cemetery? the president asked of the editor of the Quohosh Bugle.

Let me see, replied the editor. How would this do: We have come to stay?

The advertising agent of the Wisconsin Furniture and Coffin Co, inserted a clause in one of his ads. as follows:

No person having given one of our air-tight coffins a thorough trial, will ever use any other.

It is Important

For the Physician to watch the character and quality of the remedies used in his prescriptions. Responsibility DOES NOT CEASE when the patient leaves the office; for impure, stale, or inferior preparations may be used without his knowledge. Personal examination of remedies presrcibed—is the best check upon substitution.

Ferro-Salicylata Liquid.

MERRELL.

An eligible combination of Methyl Salicylate and Tinct. Citro-Chloride Iron, in a pleasant and permanent form.

Each Fluid Drachm Contains

True Salicylic Acid—from Oil Wintergreen (Methyl Salicylate), ... 5 grs.

Tinct. Citro-Chloride Iron, ...5 minims.

NOT SOLD IN BULK.

Ferro-Salicylata.—Merrell.

Ferro-Salicylata is especially valuable in that shade of disease peculiar to in anæmic, delicate, poorly nourished or broken down patients—usually aged people—children or youth—but met with in all ages. In adults, and often in children when the disease is not plainly chronic, there will be a long series of recurrences with intervals of doubtful health. It may also be employed in acute articular rheumatism, and in some cases of acute tonsillitis, especially where the diagnosis is at first in doubt between rheumatic angina and diphtheria, also in acute rheumatism and rhenmatic affections generally.

Ferro-Salicylata may be used in combination with the Iodides and Bromides of Potassium and Sodium. Associated with the former, it will prove an admirable alterative and tonic in secondary syphilis attended by a debilitated condition of the general system. It also combines; well with Chlorate Potassium, the Hypophosphites, Fowler's Solution the vegetable bitter tonics, either in Fluid Extract or Tincture Form.

Ferro-Salicylata and all other preparations of this Company reach the laity through professional channels only, we therefore avoid entering into the minute details of their application, leaving the physician to make such practical use of our therapeutic notes as in his judgment may be best suited to individual cases.

Ferro-Salicylata may be obtained of wholesale druggists throughout the United States, of our Eastern Office, 96 Maiden Lane, New York City, or direct from the Laboratory.

Please designate "Ferro-Salicylata—MERRELL."

ELIXIR

Pinus Compositus.

MERRELL.

Each Fluid Drachm Contains

White Pine—fresh Bark	2½ grs.
Balm Gilead Buds	2 grs.
Spikenard	2 grs.
Cherry Bark	1¾ grs.
Ipecac	¼ gr.
Sanguinarina Nitrate	1-64 gr.
Morphine Acetate	1-16 gr.
Ammonium Chloride	½ gr.
Chloroform	½ minim.

NOT SOLD IN BULK.

Elixir Pinus Compositus.—Merrell.

An admirable combination of well-known and highly approved medicinal agents; recommended in acute, chronic and capillary bronchitis—in ordinary coughs and colds, and wherever a "routine" expectorant is suggested. In the troublesome cough following "La Grippe" it proved invaluable—many of our correspondents looking upon it as a "specific" in this stage of the disease.

CAUTION.—Physicians are reminded that the Elixir Pinus Compositus of this manufacturer is wholly unlike the many syrups, etc. under different names, and the difference will be readily appreciated when tried. In testing the physical properties of the Elixir Pinus, note especially its delicate taste and perfect freedom from the oder of rank syrup, the drastic, harsh and repulsive characteristics of the crude blood root, and other coarser ingredients, characteristic of competing preparations.

"Merrell Co.'s" "Green Drug," Fluid Extracts, True Salicylic Acid. Salts of Hydrastis, Fluid Hydrastis, and Specialties may be obtained of wholesale druggists throughout the United States, at the Home Office at Cincinnati, or the New York Office, 96 Maiden Lane, New York City, Richards Drug Co., San Francisco, Agents for Pacific Coast. Prices current and printed matter cheerfully supplied.

THE WM. S. MERRELL CHEMICAL CO.

CINCINNATI. NEW YORK.

MURRAY DRUG CO.
Columbia, S. C.

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Ascites or Pregnancy.

An unfortunate error in diagnosis and treatment was recently made in the city of Stockton, and has become public property through the medium of the papers (*Occi. Med. Times*). It appears that a Mrs. Ford, who had previously borne five children, consulted a physician for what she supposed was stomach trouble. The gentlemen in question informed her that she was pregnant, and that the supposed trouble was due to her condition. The patient, however, was not satisfied and later consulted Dr. Beeds, of that city, who told her that she was not pregnant but suffering from dropsy. As the "swelling" persisted under eternal treatment, he decided to tap, and the operation was accordingly performed with the assistance of another practitioner. No fluid was found, but on the following day the woman was delivered of male twins, apparently of about four months growth. The woman was seriously ill for some time, but has now recoverd. While distressing mistakes of this character have been made before, it certainly appears that in the present case there was but little excuse for the error. A history of pregnancy in a maried woman, and the opinion of a physician that this condition existed would certainly demand most careful investigation. With twin pregnancy of over four months duration, it is difficult to see how, even in the absence of a positive diagnosis, there would have been ample grounds for suspecting something more than ascites.

The widow of an old friend of mine, a physician, wrote me some two months since that three doctors, one a specialist, after a thorough examination, had stated that she was afflicted with a cancer of the uterus, and had determined upon the removal of the organ. I wrote her to defer an operation for a while at least, assuring her that if she had a cancer and it had become constitutional, the operation would not prolong her life, but probably only spread the disease, even if she survived it. At the same time I sent her a sample box of Ponca Compound, with directions for use, and also a favorite prescription of mine for vaginal injection, which finally, after careful instructions, was to be injected into the uterus. After taking the medicine for some weeks, she writes: "I think I am improving wonderfully. I would like to continue the use of the tablets a while longer. They seem to have a marked effect on the uterus.

I note it is getting softer and more natural. I am feeling decidedly better. Have gained five pounds within the last month. Have a good appetite and sleep tolerably well."

W. G. Brown, M. D., Rockford, Ills.

The Anglo-American Vienna Medical Association fulfills a useful function towards English-speaking students who visit Vienna for purposes of study. It is difficult for a stranger to arrange his work to the best advantage without the advice of those who have already studied in Vienna for some time. The Association keeps a list of the best lodgings, and thus smooths the entry into Viennese school, and at the fortnightly meetings the new arrivals is able to make acquaintances and obtain information. The second meeting of the Association this winter was held on October 14th, when about forty members were present. Dr. Blake, the President, occupied the chair. The Rev. Francis Gordon read a most satisfactory financial report for the past year, and was able to announce that forty-three new members had joined the society. Dr. Meirowitz then read notes of a most interesting case of hysteria in Vienna, illustrating many peculiar phases of the disease at present under treatment. In the discussion which followed many of those present related personal experience in connection with the treatment of hysteria, some of which caused considerable amusement. Several papers have been promised for the ensuing meetings, many of them of great interest. The next meeting will be occupied in discussion the merits of Berlin as a medical centre. Further information may be obtained from the Secretary of the Society, No. 12 Landesgerichtsstrasse, Vienna.—*Ex.*

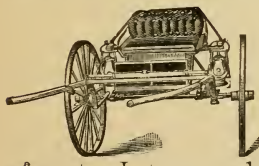
A Mexican woman is said to have two faces, one is placed in the usual position and the other is on the right thigh; the latter has two eyes and a mouth containing all the teeth. When the cheeks of the second face are pressed the eyelids are caused to open. In other respects the woman is well formed.

The difference between drunkenness and inebriety is stated by M. Trelat thus: "Drunkards are people who drink whenever they find an opportunity for drinking; persons afflicted with inebriety are diseased, and drink only when the attack seizes them. Drunkenness is a vice; inebriety is a disease."

A Prescription For Young Physicians.

According to the BRITISH MEDICAL JOURNAL a distinguished Vienna professor gives the following prescription to all young physicians who call to take leave of him before embarking on their professional career. R. Veritatis, humanitatis, fidelitatis, aa infinitum. Misce, Ft. Eliqir virtæ. Signa: to be used constantly throughout life. It is easy perhaps for some to start with a good stock of this spiritual elixir, but the difficulty is to find an apothecary who can dispense the prescription when the supply has run out.—*Med. and Sur. Reporter.*

There is a law in Massachusetts against the practice of docking horses, and the Society for the Prevention of Cruelty to Animals has succeeded recently in obtaining several convictions under its provisions. The law reads as follows: "Whosoever cuts the solid part of the tail of any horse in the operation known as docking, or by any other operation performed for the purpose of shortening the tail, and whoever shall cause the same to be done or assist in doing such cutting, unless the same is proved to be a benefit to the horse, shall be punished by imprisonment in the jail not exceeding one year, or by a fine of not less than two hundred and fifty dollars. One half of all fines collected under this act, upon or resulting from the complaint or information of an officer or agent of the Massachusetts Society for the Prevention of Cruelty to Animals, shall be paid over to said Society in aid of the benevolent objects for which it was incorporated." A similar law was also passed at the last session of Congress for the District of Columbia. —*American Practitioner and News.*



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Ignorance.

Sir William Cull was asked by a lady if he did not consider experiments on animals as cruel. "Madam," he said, "there is no cruelty compared to ignorance."—*The Humanitarian.*

Thermometric Observation.

"Mamma," said little Johnny, "if I swallowed a thermometer would I die by degrees."—*Exchange.*

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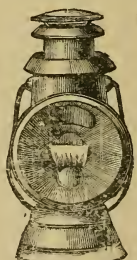

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Charlotte Medical Journal.

Vol. I. CHARLOTTE, N. C., FEB., 1893. No. 8.

Original Communications.

The Value of the Opthalmoscope in General Practice.

BY J. M. HAYS, M. D., OXFORD, N. C.

Not long since I remarked in the presence of several physicians that the time would come in the near future, perhaps, when the opthalmoscope would be considered just as essential a part of the doctor's outfit as the hypodermic syringe and clinical thermometer now are. Of course my remark was challenged; but was I not right? When we realize what rapid strides are being made in Pathology—how much more, in other words, there is for us to find out in order to make an intelligent diagnosis, we naturally herald with delight any newly-established *fact* which may bear upon cases which we are treating, or may be called upon to treat at any moment. How imperative then it is that we should be possessed of scientific instruments and appliances by whose use we may ascertain *many facts* otherwise beyond our ken.

Some time ago I was called, in consultation, to see a lady living at some distance from my home. When I reached the house the attending physician stated that the patient was doing finely; that her pulse and temperature were both normal. My Hicks thermometer under her tongue registered 103° and by a careful count her pulse were 120 a minute! My friend scorned the idea of being dependent upon such puerile aids to diagnosis as a watch and thermometer, neither of which he had ever owned. Not long afterwards, in token of an act of kindness to me, I presented this friend with a "P & D" hypodermic syringe. He thanked me but said that he had never used one and never expected to, as they were unnecessary in country practice and positively dangerous! This gentleman was once a member of our Board of Examiners and I mention these incidents to show how set in their ways some of our most highly esteemed brethren become, and how they view

the innovations made in medical practice with suspicion or positive aversion after they have learned everything taught at their alma maters and had it clinched with a diploma.

Recently I was discussing the germ theory of disease with another medical gentleman, a graduate of one of the oldest and best medical schools in the country. He listened courteously for a while to what I had to say, but, finally unable to suppress his pent up feelings longer, he stamped his foot upon the floor and emphatically declared that there was no germ disease except *itch*, and that the whole germ business was a hoax and a fraud. I took him to my office soon afterwards and placed under my microscope a drop of stagnant water colored with picro-carmine. There were plainly visible myriads of micro-organisms of various shapes, sizes and complexion. But my friend asserted that he saw nothing but "something red," and if that was what I called germs he was more than ever convinced that the theory was not a condition, but an iridescent dream.

Thus it appears that what is behind the eye is sometimes of more importance than what is in front of it. At any rate my elegant Hartnach microscope which to me is a *sine qua non* in the diagnosis of many cases of tuberculosis, gonorrhoea, and other germ diseases. To say nothing of its value in urinalysis, was to my friend a sublime monument to my folly, and a mockery to the practice of medicine as he understood it.

But the wheels of progress cannot be stopped by intellectual rust and inertia; neither will they cease to revolve that those in the rear may catch up. Nor can those of us who are breathlessly striving to keep in line afford to have our ardor checked nor our patience harrassed because forsooth we are sometimes looked down upon with scorn by our excellent but indolent sires in the profession. Their places in turn will be filled by the younger generation. We all have our entrances and our exits, and each man in his time plays several parts.

It is unnecessary for me to multiply instances where diagnostic contrivances have been forced upon the attention of the profession, weighed in the balances, often found wanting and cast aside, or proven of value and adopted into general use in spite of the "conservative element" which is always with us. Examples will of course occur to all who may chance to read this article. The point

which I desire to emphasize particularly is this: that the opthalmoscope which is in constant use by the occulist, and is so highly valued by him, ought to be used more generally in the diagnosis of the everyday cases which are seen first by the general practitioner, or come under his observation alone. I need say nothing of the use of this instrument in the diagnosis of the errors of refraction because that is a line of work rarely taken up by the general practitioner, and all who might care for what I would say upon such a subject, could doubtless say it much better themselves. I will simply note that everyone who undertakes to fit glasses scientifically uses the opthalmoscope as a routine practice; and there are a few occulists, notably Dr. Hirchberg, of Berlin, whose student I was some years ago, who are so accurate in its use that no other test is found necessary in myopia, hyperopia and many cases of astigmatism. This is because from long and diligent practice with this instrument they have acquired the ability to relax all effort of accommodation in their own eyes, and hence any error of refraction which may be found to exist can be with certainty charged to defect in the eye of the observed, and when duly corrected with the opthalmoscopic lens of certain focus, said lens is known to be the glass required by the patient.

Many cases of traumatic injury involving the sight are first seen by the general practitioner. Here, with the aid of the opthalmoscope and especially with the *habit of accuracy* which its routine use implies, the physician is able to locate the lesion or the foreign body, as the case may be, thereby determining the proper treatment to be pursued.

The temporizing plan of treatment so often adopted in such cases in trusting to nature or luck to effect a cure is too frequently fatal to vision not only of the injured eye, but also to its fellow, by so-called sympathetic opthalmia—really infection through the lymph channels.

Doubtless the saddest chapter in the experience of any physician who has had much eye work to do, is the one relating to glaucoma. To those who have read the recent very able paper on this subject by my friend Dr. R. H. Lewis, I could probably say nothing new of this painful affection. Suffice it to say that it is a condition which, if diagnosed early is quite amenable to treatment in the majority of instances, but when left to itself, or

treated as "neuralgia," which is more usual, total blindness is sooner or later inevitable. Yet by noting certain well marked symptoms, and especially that of the cupped disk so readily observed by the opthalmoscope, this mistake need never be made. I have recently been consulted by four persons with *glaucoma absolutum* who were treated through weeks of intense suffering by their family physicians with anodynes, the diagnosis in each case being "neuralgia of the face affecting the eyes." Of course I was unable to do anything for these unhappy individuals except to pronounce that awful sentence—hopelessly blind.

If the general practioner is to understand but one eye disease, let it not be conjunctivitis, let it not be granular lids, let it not be iritis nor cataract, but in the name of this large class of persons already blind and more particulary in the name of those who may yet follow, I beg that they may learn to diagnose glaucoma, and fully realize the frightful train of symptoms which follows in its wake unless the intraocular tension is relieved and the integrity of the optic disk preserved.

But it is not so much in eye afflictions purely that the opthalmoscope is of service to the general practitioner as in cases which belong to his exclusive domain. When we recall the fact that no artery or vein of the body can be seen directly except the retinal vessels; and the further fact that the cranial circulation is of greater importance and more frequently calls for investigation at our hands than that in any other part of the body; and when we frankly admit the difficulty of diagnosing cerebral anaemia from cerebral hyperaemia, and realize the great importance of making this distinction before beginning a rational course of treatment; then it begins to dawn upon us that it is a very desirable thing to know the condition of the cerebral circulation. This is almost always indicated by observing carefully the branches of the *arteria retina centralis* and the accompanying veins. I do not intend to convey the idea that I consider the opthalmoscope absolutely essential in making this differentation. I have for several years accepted as one of the fixed articles of my faith the theory so ingeniously adduced, so ably promulgated, and so masterfully maintained by Hammond that sleep is indicative of anaemia and wakefulness of hyperaemia of the brain. I was more than ever convinced of the truth of this proposition last summer whilst

acting resident physician to Hammond's Sanitarium in Washington where the material and time were both abundant for putting the matter to a crucial test for my own satisfaction. I may say, however, that every patient admitted into that excellent institution is subjected to a thorough opthalmoscopic examination upon entering and at frequent intervals thereafter. Dr. Hammond has found during many years of the richest experience that the opthalmoscope is an invaluable instrument in the diagnosis of nervous diseases of whatsoever nature, and his classic works on this subject opens with a description of the Loring instrument. The most approved pattern of opthalmoscope, however, has a tilting mirror, an improvement not noted in the last edition of the work just referred to; though after using mine for a while with so much pleasure, I think the doctor will advise the tilting mirror in the next edition of his treatise.

Up to five years ago I used the little Liebreich instrument exclusively and managed to get along pretty well with it, so I thought. One day at the Manhattan Hospital, Dr. Roosa told me that if I would get a Loring instrument I would "always be happy" in its use. I have found it true, and often been thankful to that gentleman for his advice.

In using the opthalmoscope one should always make it a rule to examine each eye separately. I have frequently been thus enabled to diagnose with certainty localized diseases or conditions affecting one eye, one optic nerve, or one cerebral hemisphere alone.

It is not within the scope of this article, however, for me to lay down the rules to be observed in the systematic use of the opthalmoscope. They are all fully treated of in the text books, and it is to them that I would refer any who may be prompted by this notice to seek any additional light on the subject. Of course one can learn much more readily from an instructor who himself has mastered the science as well as the art of opthalmoscopy, than from any number of books. Yet, I can testify from experience, that an instructor is not necessary. In the old Charleston Hospital, which has since become a prey to the earthquake, several of the house surgeons, I among the number, began the practice of opthalmoscopy upon an artificial eye made for the purpose with a variety of interchangeable retina and choroids supposed to represent the normal fundus and its ordinary diseases. Several of us

soon learned to diagnose these "cases." After some practice we could make out the disk in the human eye; then the retinal arteries and veins, the *macula lutea* and all that in them was. Having become familiar with the interior of healthy eyes, it is not a hard matter to detect the grosser deviations from the normal, and finally the most delicate pathological conditions.

The necessity for patient and painstaking practice in acquiring the facile use of the opthalmoscope, even when the instruction derived from books and teachers has been duly assimilated, cannot be too thoroughly emphasized. But the art is within the reach of everyone who is willing to acquire it, and I re-assert that the time will come when every well equipped practitioner will possess and be able to use the opthalmoscope. This change is to be wrought by the younger members of the profession. Our seniors, who were taught to make diagnosis without the aid of the present instruments of precision will scarcely in any considerable number make obeisance to the modern methods.

But is it not the imperative duty, as well as the privilege, of the coming generation of practitioners to avail themselves of every such appliance; and will they be doing justice to themselves, or to their patients, if they neglect so great salvation? If we are twitted with the suggestion that only the halt and lame need crutches, and that the use of such paraphernalia by physicians is a reflection upon their ability to reach the desired end by the reasoning faculties alone, let us take courage from the fact that no general hospital of any pretention, in any State or country, is without a full outfit of modern diagnostic and therapeutic appliances, and that the proper use of these means is largely what has rendered the results of hospital work so much more satisfactory thon those obtained in private practice.

I wish to note briefly in closing this paper, already much longer than was at first intended, a few instances going to show the value of opthalmoscopy in cases such as are liable to be seen any day by country physicians.

F. M. B., a young white man was struck on the head with a stick while fighting and knocked senseless. Meningitis followed from which he finally recovered, but with defective vision. When he first consulted me I found by the aid of the opthalmoscope that he was suffering from *optic neuritis descendens* with alternating

convergent squint of recent occurrence. His vision was o. d. $\frac{20}{50}$ —, o. s. $\frac{20}{50}$. I put him on a polass iodid, polass brom. $\overline{aa}$ gr x t. i.d. In ten days vision had improved to $\frac{20}{40}$ x in each eye. Two months later his vision was $\frac{20}{20}$ x in each eye and squint entirely cured.

Fanny R., mulatto, aet 39 (one of twenty-seven living children of the same mother) stopped me on the roadside, several miles from town, with the request that I do something for her eyes as she had been getting blind for several months. I found her barely able to count fingers with her right eye, the left being but little better. Pupils visibly dilated. No pain about eyes or elsewhere. I promised to call at her house the next day and examine her eyes carefully. With the opthalmoscope, by the light of a little smoky lamp, I found a well marked case of *retinttis albuminurica*. Upon testing the urine in an iron spoon (I had not then learned to carry a test-tube with me). I found it loaded with albumen. I ascertained that the dilitation of the pupils was due to the instillation of a solution of atropia several days before by another physician. Atropia was good for bad eyes, she had bad eyes, hence, atropia! I put her on Basham's mixture of tr. ferri chlor., tr. digitalis, Sig. ammon. acit. Ten days later she came to my office and I found her vision greatly improved, being now o. d. $\frac{4}{20}$, o. s. $\frac{20}{50}$ —. Treatment continued. It was several months before I again saw her, then by accident, in the country. She said that she had not returned to see me because her eyes were well. This was several years ago. I have not seen her since and do not know what has been her fate.

Maggie D., aet 14, was sent to me from the orphan asylum to have her eyes treated. She had always been partially blind. Her vision was o. d. $\frac{20}{100}$ reads J. No. 2 at 5 in.; o. s. $\frac{6}{100}$ — cannot read J. No. 20 at any distance. No asthenopia. Upon opthalmoscopic examination I found the choroid densely studded with numerous irregular circumscribed spots of pink and white color surrounded by black edges, others appearing simply as small black patches. This condition at once led me to make a diagnosis of *chroiditis disseminata syphilitica* of hereditary origin. The little girl told me that her father had always been sickly up to the time of his death, several years before from "rheumatism." Her mother had died more recently, but had not been well since she could remember. I wrote to the physician who had treated the parents for

more definite information in regard to them, at the same time stating my diagnosis in the case of the little girl. He replied that he had no doubt as to the correctness of my diagnosis, as the child's father had died of syphilis, and the mother had for many years been on the town dispensing her favors most promiscuously regardless of the color of her companions."

Dudley's Operation on the Cervix, with a Report of Five Cases.

BY T. D. MARION, M. D., CHESTER, S. C.

In the American Journal of Obstetrics for February, 1891, Dr. E. C. Dudley, of Chicago, recommends "A Plastic Operation Designed to Straighten the Antiflexed Uterus," moderately suggesting its adoption "when the indication to be fulfilled is wholly or in part mechanical." Soon after reading this article I determined to perform the operation on two cases that had given me no little trouble. Dilatation with steel instruments and the introduction of drainage plugs would give relief to the dysmenorrhœa, and symptoms incident thereto for two or three months; but, as on many previous occasions, the old symptoms would return, which were alike annoying to myself and patients.

In this connection I will be pardoned, I trust, for recalling the experience of a very prominent gynecologist of New York City, as expressed by him a few years ago, to-wit: he obtained much better results in the treatment of anteflexion than in retro-displacements, claiming that free dilatations, judiciously executed, would accomplish alleviation of the patient's subjective symptoms. The idea seemed quite plausible, and coming from one of the masters I was eager to put the views of this specialist in practice. But the necessity for a more radical method of dealing with this trouble becomes more apparent and convincing the more so-called free dilatations are practiced. At best, in the vast majority of cases, the procedure is but temporary in its effects, and he who pins his faith to it as a curative agent is doomed to disappointment. The following cases are briefly submitted in support of Dudley's operation.

CASE I.—Mrs. T. A. S——, aged twenty-nine, married ten years. Menstruation was always painful, which gradually became more

intense after her marriage. The week before and during the flow, complained of severe cramping in stomach as well as in the bowels, headache, backache, palpitation, loss of appetite, etc. At first anodynes and tonics, in short, the batteries of the materia medica were discharged on her, but, it is needless to say, with negative results. A few years later a doctor, recently in attendance at one of the Post-graduate schools, saw at once the thing to do was free dilatations, all of which gave relief for a time, but both doctor and patient became tired and discouraged over repeated failures to obtain permanent benefit, and in consequence the patient drifted back to the old habit of taking anodynes. That she escaped septic infection, with the tubes and ovaries undisturbed, must be a great comfort to all the parties concerned. Free mobility of the uterus excluded the possibility of tubal complications, and made the way clear to proceed with the operation of dividing the cervix well back to, but not beyond, the vaginal junction, as Dr. Dudley is wont to do. "The sutures are not introduced in such a manner as to stitch the intracervical to the vaginal margin of the cut surface, but the cut surface is folded upon itself in a direction at right angles to this, *i. e.*, on either side of that point at the margin of the os externum where the backward incision commenced, and is stitched to the very angle of the incision, so that the cut surface is folded upon itself, not from within outward, but from before backward." This done the cervix no longer lies parallel with the fundus, but projects back toward the concavity of the sacrum—as was demonstrated in the case before me. The operation relieved the patient of all the old torture she endured periodically for years. Six months after the operation pregnancy followed, over the occurrence of which she was highly satisfied.

Case II.—Mrs. S. P——, aged twenty-eight, married seven years. Sterile; marked anteflexion; menstruation exceedingly painful for several years, for which she had been dilated with steel instruments time and again, while under the influence of chloroform, but the good results obtained would always prove temporary.

For two years previous to consulting me she had been having convulsions, commencing the day before, and recurring at intervals of two or three hours until the flow was established. The cervix was elongated and almost of cartilaginous hardness. After a preparatory course of hot-water injections and medicated tam-

pons (glycerine and boro-glyceride), the cervix was divided and treated as before. It is now twelve months since the operation, and during this time she has been free from pain and convulsions. She has also gained thirty-eight pounds in weight.

CASE III.—Mrs. J. B.——, aged thirty-two. Dysmenorrhœa from girlhood. Sterile. The mechanical indications were much the same as in the two preceding cases. Frequent and painful urination prevented sleep, which added greatly to her general discomfort. The appetite was gone, and nausea almost constant. Bowels costive for two or three days, when a "milky" diarrhœa would set in and last three or four days, which no amount of medication on the part of her physician was able to overcome. She had a profuse leucorrhea when brought to me from an adjoining county by her physician, who, be it said to his credit, was not a gynecologist. The cervix was elongated and eroded, the fundus resting on the bladder, there was also some fulness on the left side of the uterus, with partial fixation, which was reckoned as the danger-signal against operation. Whether this fulness was due to enlargement of the pampiniform plexus, or to a mild salpingitis, I am unable to say. The risk of operative interference in the face of peri-uterine complications was explained to my patient, and her co-operation readily obtained in carrying out the necessary preliminaries, which consisted in hot-water injections (medicated with boracic acid) and boro-glyceride tampons to the lateral cul-de-sac. After persevering eight weeks with this local treatment, free mobility of the uterus was obtained, when the cervix was cut back freely as before, and with three sutures in each flap the bleeding surfaces were doubled over on to themselves. It is now nine months since the operation, and she has had no return of her old symptoms, for which she is very profuse in her expressions of gratitude. Twice has she failed to menstruate, and this, coupled with other evidence, makes pregnancy almost an assured fact.

CASE IV.—Miss ——, twenty-one years of age, a resident of Florida, had been on a protracted visit to a famous health resort in North Carolina, and on her return home stopped with a friend in an adjoining county, who happened to be a former patient of mine, to whom she related her sufferings, and also her intention of going to a hospital in Atlanta, Ga., and placing herself under the special care of a gynecologist. She had failed to obtain any

benefit from her stay in the mountains, and, altogether, was a much discouraged woman—was exceedingly nervous and hysterical, at times craving to die rather than live. She warned me that if I even touched her over the bowels it would bring on a convulsion. Preferring to take her word for it, chloroform was given, and a digital examination satisfied me that Dudley's operation, properly done, would cure her. The dysmenorrhœa dated back to her first menstrauation. During the eighteen months previous to operation, metrorrhagia existed as a complication. The vegetations causing it were removed by Sims's smallest curette, the cavity swabbed with a bi-chloride solution (1 to 1,000) and followed by packings of iodoform gauze, which Polk, of New York, has done so much to make popular in this special field. The packings were allowed to remain undisturbed for three days, when they were removed and Dudley's operation performed. This was followed by the most happy results. Nearly a year has elapsed since the operation, and during this time there has been no return of the dysmonorrhœa, headache, neurasthenia, etc. As is often the case after using the curette for fungous granulations, she failed to menstrauate on two succeeding occasions.

CASE V.—This case was in many respects similar to Case IV. The anteflexion probably being more accute. She has menstruated once since the operation, which was free from pain.

In conclusion I will say that in four of the cases operated on, the anterior lip was not removed as advocated by Dudley. In not one of the cases did the ovaries and tubes react on the treatment; they had been well prepared. Perfect cleanliness and scrupulous attention to antiseptic details must be regarded as indispensable requisites to success.

The Advantage of Asheville's Climate for Phthisical Patients.

"Asheville, N. C., and its advantages as a climate resort for phthisical patients," is the title of an article by Prof. J. W. Gleitsmann, of New York, published in the December number of the New York "Medicinische Monatsschrift." The writer considering the essentials of climate for the cure of phthisis, shows that elevation, temperature, and the humidity are the main factors and that an elevated resort lying between 2,000 and 3,000 feet above the sea

level, with a moderate winter, and cool summer temperature and a relatively dry atmosphere is most desirable. Asheville, N. C., where he has resided for a number of years heretofore, presents such climate conditions, being there favorable for the entire year. It has an elevation of 2,350 feet. is situated in the Alleghany Mountains at their highest point between the Blue Ridge and the great Smokies. The whole plateau has excellent drainage with no marshes or standing water, and enjoying entire freedom from malaria. The city itself has recently been greatly improved in its local sanitary appointments; it has paved streets, good accommodations for tourists and invalids, and there is also located the Winyah Sanitarium a special institution for diseases of the lungs and throat, in charge of Dr. Karl von Ruck, who is otherwise known to the profession by the clinical results in phthisis, and his contributions to medical literature on this subject.

The climate in winter, while not warm, is not so cold as to interfere with the out of door patients, and in protected places during the hours of sunshine the temperature reaches frequently 70 to 80° F.

The average mean temperature for the winter months is 49°. In the summer the place is cool and compares favorable with any other resort in this country, the highest degree of temperature observed by the writer was 80°, while during the same year 90° were exceeded at 47 places in Canada, 50 times at Denver, Col., reaching there 102°, and 39 times at Colorado Springs, where a maximum of 101° was observed.

Higher temperatures were also observed at Sandy Hook, New York, and other places, and at St. Paul 25 times with a maximum of 99°. Asheville's average, mean summer temperature is, according to Dr. von Ruck, 65°. The Asheville plateau, from the meteorological data given, has an annual precipitation of about 40 inches, and the relative humidity is 60° in the winter and 70° in the summer, while the absolute humidity is less than any other point east of the Rocky Mounatins showing the place to have the third requisite, "a dry climate."

Another feature of the Asheville climate is the presence of considerable quantities of ozone in the air; this, in view of the increasing popularity of oxygen as a remedial agent, is particularly interesting. Measurements for the last three years by Dr. vonRuck

show an average ranging from 50 to 75 per cent. of the possible amount, whereas, only five per cent. was found to be present in his observations made formely in Ohio.

The article concludes with a short consideration of the advantages of institution treatment as compared with sojourn at climatic resorts without the strict care and management which a good institution affords, the author holding that the later are indispensible to the best results. He says—"It is not a single agent, not even climate, which constitutes a panacea for phthisis, but it is the careful and continued application of a variety of means adapted to the present condition of the individual patient which promises most.

Patients do not as a rule know what will benefit or injure them. They need constant care and supervison. The diet must be adapted to their present state of digestion. Many who are already on the way to improvement suffer relapses on account of physicial over-exertions. Climate alone protects not against faulty conduct and indiscretions committed, whether the result of ignorance or from want of self-control. Such a detailed oversight which must be extended into the minutest details is only possible by the physician who has the patient continuously with him, in other words, in a special institution.

A year ago the author spent several weeks in the institution of Dr. von Ruck, and shows by the description of its location, appointments and management that complies with every essential requirement, and quotes from the Climatologist for September, 1891, the clinical results obtained there.

Of 605 cases treated, subsequent information as to their conditions were received from 457. Among these were cured—67. With the disease permanently arrested, and enjoying good health —70. Materially improved—258, and grown worse—62. Results which indeed, speak more strongly than any argument in favor of institution management as well as in favor of the advantages of Asheville's climate.

The Buncombe County Medical Society.

The Buncombe County Medical Society met in regular session, January 2, 1893, President Whitington in the chair.

Dr. von Ruck, by request of the Society, read a paper on the Treatment of Pulmonary Tuberculosis Apart from Climate. The

author stated that the remedies, if any we have which are of benefit at all, should find employment at climatic resorts as well, climate being by no means a specific, or so uniform in its results that, having resorted to it we can complacently await the patient's recovery. To show his estimation of remedies, he described their employment in the special institution for phthisical patients, under his charge, and believes that the same methods can be carried out in private practice at least to a degree that would assure improvement and cure in a greater number of cases.

Patients at the Winyah Sanitarium are first instructed as to the danger from their expectoration, and receive proper instructions as to its safe disposition. They are warned of the danger from physical and mental over-exertion, and are told that while exercise is essential and beneficial, it becomes indifferent or a source of danger and a cause for relapses when carried to a degree of sensible fatigue or when it is taken so rapidly that it produces shortness of breath. Fever is treated by absolute rest and proper diet, and if necessary by stimulants and hydropathic applications. Drug anti-pyretics are entirely avoided. The diet for fever patients is light, in high fever, solid food is entirely avoided; the feeding is frequent, and if patients lose flesh under the regimen, rectal feeding is resorted to in addition. Patients free from fever receive a generous, mixed diet, well cooked, nicely served to the avoidance of pastries and articles of food which in the particular case seem to disagree.

In dilatation of the stomach and severe gastric catarrh, lavage and the use of electricity are recommended. Creosote is only used for its influence upon digestive derangements, and the author says it has no specific effect upon the tubercular process, having demonstrated that the germs grow luxuriantly in blood serum from patients who are practically saturated by large and long continued doses of creosote, and that the germs from their sputum will produce virulent cultures.

As a general tonic and to prevent taking cold, every patient receives before rising, a cold water rub, with brisk friction thereafter, and in weak heart he uses strychnia in full doses.

Cough mixtures are never used, the general management being correct there is no indication for them. Local pleurisy is treated by rest and counter-irritation.

Urine analysis should certainly be made in all cases where the disease has advanced to destructive changes, amyloid kidney being more frequently found than the text boo ks indicate, and these cases are considered hopeless.

Bloody expectoration is treated by rest and cough then moderated by codeine. Exepectoration of clear blood and more decided hemorrhage occurred in less than 1 per cent. in his private institution, and also much less frequently in his private practice since he has learned to appreciate the detrimental effects of over-exertion. He distinguishes the form due to destructive change and that which results from over exertion; rest, diet, ice, ergot, morphia, strychnia and astringent inhalations being considered the most useful.

The author still believes in tuberculin, although he was obliged to abandon its more general use in his institution owing to prejudice, both of the profession and of patients. He never saw any disagreeable effects, on the contrary he witnessed most satisfactory improvement under its use as advised by him.

The pneumatic cabinet is used in a restricted sense, and good results as to better circulation and vital capacity are obtained.

Oxygen and ozone are frequently used in connection with ferruginous preparations, when anæmia does not yield to the climatic and other influences.

Plenty of out door life is recommended both at home and at the resort.

A resolution of thanks to Dr. von Ruck was adopted by the society.

Dr. Fletcher demonstrated a specimen of large. uterine, fibroid, polypus recently removed by him; the growth having given rise to hemorrhage and being partially protruded from the cervix.

Dr. von Ruck was appointed a committee of one to draft suitable resolutions and to convey them to the family of the recently deceased Dr. Harry S. Williams.

The society then adjourned.

Dr. Harry S. Williams.

At the meeting of the Buncombe County Medical Society, held at Asheville, January 2, 1893, the following preamble and resolutions were adopted:

Whereas, in the death of Dr. Harry S. Williams, the profession has lost a member who gave promise of a most brilliant professional career, and who by his high character and social qualities was esteemed by all who knew him.

Resolved, that we express our realization of the great loss sustained by the profession and the community and extend to the bereaved family our heartfelt sympathy in their great affliction.

Our New York Correspondent.

In looking for a cause for trigeminal neuralgia and in outlining our treatment in obstinate cases the teeth are too often forgotten, and it is not a rare thing to find practitioners who do not even make the most superficial examination of them in cases of neuralgia, though they may be utterly unable to give the patient the least relief. That the teeth are among the causes of trigeminal neuralgia was evidenced by a case presented by M. A. Starr at a meeting of the neurological society of this city. The patient had suffered for some time from a trigeminal neuralgia which the ordinary methods had failed to relieve, but which was immediately cured by the extraction of two teeth, which were found to be markedly decayed at the roots. We do not mean to say that every one suffering from an obstinate trigeminal neuralgia should have his teeth extracted, but it is very probable that if more teeth were examined fewer cases would be obstinate.

One of the most interesting cases that has come to the notice of the writer for some time was presented at the Vanderbilt Clinic by Dr. Taylor. The patient was a negress, about 28 years old, who gave the following history: she had been healthy all her life and never had any specific disease. When a child while but scantily clothed, she was made to drag brush, and the body, about the waist, was constantly irritated. She said that while thus employed "bumps" would frequently appear but were torn away by the brush. After being released from this work swellings appeared about her waist and when presented at the clinic she had a large growth extending completely around her body, reminding one of a large, dark, distended colon fastened about her waist. There were also large growths of the same nature on other parts of the body, one about each ear, which followed piercing the ears, the two being nearly as large as her head, one about the size of an egg on the

forearm, following a boil, a large one on her ankle following an irritating shoe, and numerous others on different parts of her body, all of which had followed some long continued irritation. The patient did not feel unwell and only wanted to get rid of the growths which interferred with her work and distorted her figure. The tumors were of the keloid nature, and at first thought it seemed easy enough to remove them, but the fact that they followed any granulating or irritated surface, and the tumors were so large that union by first intention could not be hoped for, it seemed as though a surgical operation would be useless. The case was again presented at the Academy of Medicine where, in the discussion as to the best method of treatment, Dr. Keys suggested that one of the smaller tumors be removed and a skin graft applied, and if a favorable result was obtained there was no reason why the larger ones should not be removed in the same manner. No report as to the result of the effort has been given.

A Journal for Negro Physicians.

M. Vandahurst Lynk, M. D., editor and proprietor of this prospective enterprise, announces: "The rapid increase of the educated Negro physicians of America is very gratifying. It has in it a glow of significance, and shows that the negro intends to contribute his share to scientific medicine. But for them to attain the highest degree of development and become giants in the Æsculapian fold, it is very necessary that they should have some medium through which to communicate, exchange ideas, and inculcate a spirit of original research and investigation. Looking to this end I shall begin the publication of a monthly medical journal. I enlist your hearty co-operation and support."—*Age.*

M. Huchard, in his fornightly notes on therapeutics, points out how necessary it is, after giving a hypodermic injection of morphine, to maintain perfect silence in the room where the patient is lying. Morphine, far from suppressing sensitiveness, like chloroform, rather tends to exalt the excitability, and particularly the liability to disturbance from slight noises. The failure of morphine injections to produce sleep is, in the majority of instances, due to neglect of this simple precaution.—*Ex.*

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It Differs in its Effects from all Analagous Preparations; and it possesses the important properties of being pleasant to the taste, easily borne by the stomach, and harmless under prolonged use.

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Its Curative Power is largely attributable to its stimulant, tonic, and nutritive properties, by means of which the energy of the system is recruited.

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The prescribed dose produces a feeling of buoyancy, and removes depression and melancholy; *hence the preparation is of great value in the treatment of mental and nervous affections.* From the fact, also, that it exerts a double tonic influence, and produces a healthy flow of the secretions, its use is indicated in a wide range of diseases.

NOTICE--CAUTION.

The success of Fellow's Syrup of Hypophosphites has tempted certain persons to offer imitations of it for sale. Mr. Fellows, who has examined samples of these, **finds that no two of them are identical,** and that all of them differ from the original in composition, in freedom from acid reaction, in susceptibility to the effects of oxygen when exposed to light or heat, **in the property of retaining the strychnine in solution,** and in the medicinal effects.

As these cheap and inefficient substitutes are frequently dispensed instead of the genuine preparation, physicians are earnestly requested, when prescribing the Syrup, to write "Syr. Hypophos. **Fellows.**"

As a further precaution, it is advisable that the Syrup should be ordered in the original bottles; the distinguishing marks which the bottles (and the wrappers surrounding them) can then be examined, and the genuineness—or otherwise—of the contents thereby proved.

Medical Letters may be addressed to

Mr. FELLOWS, 48 Vesey Street, New York.

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UTAH FOLLOWS IN LINE.

AT the meeting of its last Legislature it passed an act regulating the practice of medicine and establishing a Medical Board of Examiners to enforce it. Out of the six men who have been appointed, Gov. Thomas has given the regular profession four members, the homeopaths and eclectics, one each, leaving one vacancy. The law under these men will be rigidly enforced, and quackery, which has been rather dominant, will receive its deserved blow.

A WISE PRECAUTION.

OWING to the possible advent of cholera to this country during the coming summer months, the Carnegie Laboratory, under the direction of Dr. Edward K. Dunham, who is experienced in cholera, will give short courses on the biological examination in the diagnosis of this disease. It will be opened to representatives of Health Boards, Health Officers and medical men. The first will begin June 25th, '93. Each course will continue two weeks. Fee, $25.

THROUGH the kindness of Dr. Ambler, of Asheville, N. C., we are able to furnish our readers a copy of the transactions of the Buncombe County Medical Society, held in the city of Asheville, N. C., on January 2d, '93. Dr. von Ruck, by request, read a paper on the Treatment of Pulmonary Tuberculosis, the important points of which we publish in connection with the transactions of the society. The Doctor makes pulmonary diseases a specialty, and has had probably the largest experience in the treatment of this class of diseases of any physician in North Carolina.

A GOOD OFFER—

WHICH is unparalleled, is made to its readers by this journal, and it is one which we would like to see all take advantage of. To all new subscribers, this journal and the St. Louis Medical and Surgical Journal will be sent for one year on receipt of $3.50. The St. Louis Medical and Surgical Journal is a monthly of 64 octavo reading pages; and as the year 1893 will be its semi-centennial, unusual efforts have been made to render it more than usually interesting. A large number of the most prominent physicians of this country have promised to contribute papers, the majority of which will be illustrated. THE CHARLOTTE MEDICAL JOURNAL contains about one hundred pages of reading matter, and it, in connection with the St. Louis Medical and Surgical Journal, will form a most valuable and instructive medical library, offered at a price which is unparalleled in the annals of periodical literature.

HIGHER MEDICAL EDUCATION.

THE Medical Profession of Georgia seem happy and delighted over the fact that they will soon have a State Medical Examining Board. The bill has passed the Senate and is now in the House and from the hearty co-operation and earnest desire of the Medical Profession of that State we trust their hopes and fancies may be fully realized. In the bill there is one wise provision: that no Professor of any college will be allowed on the Board. Generally Professors of the different colleges constitute the greater number on the Board. I do not doubt for a moment the integrity or sincerity of any chosen Professor, do not doubt but that justice would be allotted to each and all, but there must be reason for the Board being constituted of men other than Professors. Every college has a record she must maintain, and when a student of this or that college appears before the Medical Board for license and Professors of the same college are on the Board the student of that college would naturally pass a better examination than those from other colleges. 'Tis almost natural, however, when a student has been the constant companion of a Professor—has been with him in his clinics, has washed his bottles in the chemical laboratory; put his dogs and cats under the influence of

ether, etc. — when all of this is taken into consideration, and he has some idea, a pretty good idea of medicine, 'tis quite a serious and difficult task to refuse to grant him license, and nine times out of ten he will do all he can to aid him; not only support him, but work dilligently for him. While all this seems natural, and I admit it would be hard indeed to do otherwise, still, that does not make it right.

WE notice an article in the Doctor's Weekly, which says: "When a contributor to the medical press of this country happens to mention the name of a proprietary pharmaceutical product emanating from the American laboratory, his sincerity is at once challenged and his statements are accepted *cum grano salis*— if at all. He is charged with attempting to boom somebody's product at the expense of the publisher and with imposing upon the credulity of the average reader. On the other hand, our medical journals teem with original articles, clippings and transactions relating to foreign pharmaceutical products that are not only proprietary but are also patented, and yet we hear no complaints from medical readers. We are unable to account for such discrimination; but that it exists, no one who is posted on the subject will deny."

The statement above is too wisely put not to bear repetition. Products manufactured from our pharmaceutical houses are as chemically pure and therapeutically valuable as from any foreign country, and yet any announcement of their superiority and beneficial effects is received with much prejudice.

A SERIOUS ACCIDENT.

DURING the recent cold and sleety weather many accidents occurred from falls and other mishaps. Among the most painful and serious was that of Dr. R. J. Brevard, of our city. The sleet and snow have made our pavements very slippery. One evening as the Doctor was returning home, he slipped in front of Jordan's drug store, fell, fracturing his thigh and dislocating his hip. Not only is the Doctor one of our leading and most esteemed physicians, but at the last election he was chosen Mayor of our city. His many friends, with the JOURNAL, sympathize with him deeply and wish him a fast recovery.

A GENEROUS GIFT.

WE often read of the large sums given by men to different educational and religious purposes, but this time a goodly, pure and noble woman has opened her heart and purse and emptied her sweet riches to benefit the medical education. For many years the trustees of Johns Hopkins University have struggled to complete the medical department of that institution, but financial embarrassment has thus far prevented. A few yeas ago the trustees appealed for half a million dollars to complete the work. About two hundred thousand of the required amount was raised, and now Miss Mary Garrett, of Baltimore, has given the three hundred thousand necessary to complete the fund.

THE American Text Book of Surgery, edited by Professors Keen and White, of Philadelphia, which has only been issued a few months, is already a phenomenal success. It has been adopted as a "text book" by forty-nine of our leading medical colleges and universities. Nearly five thousand copies have been placed in physicians' libraries, and every indication points to a sale of at least as many copies more in the next six months.

Dr. Nicholas Senn, of Chicago, is now preparing a "Syllabus of Lectures on the Practice of Surgery" arranged in conformity with the American Text Book of Surgery, which will be a valuable aid to all who have this great book.

EDITORIAL BRIEFS.

Cholera has reappeared in Hamburg. Let cleanliness be the watchword.

During the month of December several cases of typhus fever occurred in New York city.

A prize is offered in Paris for the first one who will solve this question: When is a Body Dead?

England is ahead on women doctors; 130 now practice there, and 150 are studying in same country.

It is said that the Columbian University has withdrawn from the co-educational ranks for the reason that the presence of women in the medical department kept away male students. Men being preferable to women, the above occurred.

Dr. Graham N. Fitch died at his home in Logansport, Ind., Nov. 28th, in the eighty-fourth year of his age.

Dr. D. B. St. John Roosa was recently elected President of the New York Academy of Medicine, at its annual meeting.

Mr. Ralph Butterfield, of Kansas City, recently bequeathed $180,000 to Dartmouth College. He was a graduate of the institution.

The Board of Trustees of the Cincinnati Hospital has decided to establish a Training School for Nurses in connection with that institution.

The Medical and Surgical Reporter suggests that a National Department of Public Health, with its chief a member of the Cabinet, be established.

In listing the millionaires of the United States, no physician appears among the number, but several lawyers. It will be hard for some people to believe this.

A $200,000 hospital will soon be built by the French Benevolent Society, of San Francisco. It is to be built after the pavilion system and will accommodate 150 patients.

Great minds do not always run in the same channel. The St. Louis Medical Society will not admit women to membership. The British Medical Society has recently done so.

The Southern Medical Record states in its last issue that Atlanta will soon have a Post Graduate Medical School for clinical instructions. It will be known as the Atlanta Polyclinic. It will open March 15th, 1893, for entire year.

The corner-stone of the large new building which the New York Post Graduate School of Medicine is now constructing, on the corner of Second avenue and Twentieth street, was recently laid. The President, Dr. D. B. St. John Roosa, made a brief address and laid the stone.

The proceedings of the Thirteenth Annual Meeting of the North Carolina Pharmaceutical Association, held at Raleigh, 1892, has reached our table. Much interest is manifested at these meetings, from the effects of which the standard of pharmacy is gradually rising to a higher plane.

The University of South Carolina has conferred the degree of LL. D. upon Prof. Julian J. Chisolm, of Baltimore. Dr. Chisolm is a native of South Carolina and is worthy of honor.

The Medical Fortnightly, one of our popular and enterprising exchanges, gives its readers a little history of the American "Crowbar and Skull Case," with illustration. The name of the man who survived thirteen years the passage of a crowbar, 3 feet 7 inches long, ¼ inch at small end, about 1¼ at large end, weighing 14 pounds, through his head, was Phineas Gage. Truly, Phineas Gage had a remarkable head. Either the crowbar found nothing to seriously damage, or else it required something greater than a crowbar 4 feet long to kill Phineas.

A Just Decision.—Dr. F. B. Hyland, of Stoughton, Wis., recently appeared in the Probate Court and presented a claim of $245 against the estate of Phœbe Carter. He said the money was due for 147 magnetic treatments he gave Mrs. Carter. Cross-examination on the part of the Court developed the fact that Mrs. Carter was in Florida when the alleged treatment had been given, and that the treatment was in the shape of prayers. The Court concluded that Mrs. Carter was not benefitted by the treatment, as she was in another climate at the time, and he disallowed the claim. Dr. Hyland took an appeal.—*Chicago Med. Recorder.*

Books Reviewed.

Notes on the Newer Remedies, Their Therapeutic Applications and Modes of Administration. By David Cerna, M. D., Ph. D. Philadelphia: W. B. Sanders, 1893. Price, $1.25

The advancement made in Pharmacology within recent years has been very great, almost marvelous. The deficiency of older and larger works in regard to New Remedies, the extensive resource, investigation and revolution that has taken place in Pathology and Bacteriology, has prompted the writer to offer to the Profession this work on Newer Remedies.

This book contains 177 pages—alphabetically arranged as to the remedies which makes it easy of access. As regards weights and measures both the metric and apothecaries are employed. Special attention is given to the therapeutic application of Newer Remedies and their modes of administration. Whenever possible, points are given in regard to the origin, physical properties, and

solubility of the medicaments considered. Any one can readily see the great need of such a work. We gladly recommend Dr. Cerna's book. It is reliable and can be used to advantage.

It is stated in the preface of this book that all the proof-sheets have been submitted to the authors for mutual criticism and revision. Such being the case, a more perfect and complete work could scarcely be anticipated, could be expected—criticism by a reviewer is seemingly unnecessary.

There is nothing whatever to detract from the work. At the first glance one naturally looks to see by whom each chapter have been contributed, but we may rest assured that whoever wrote this or that chapter 'twas approved by the other. Of late years the science of surgery has created a great need for new sources of references and to some extent this has been met more in foreign countries than in the United States. For this reason this work has been prepared by American authors, by men who are teachers and professors in the leading schools aud colleges of this country. Many of the most important subjects are treated from a new standpoint, and especial prominence has been given to Surgical Bacteriology and to the most recent methods of treatment in regard to asepsis and anti cepsis. The work is well illustrated, many good wood cuts and some very fine colored plates. The opening chapter is devoted to Surgical Bacteriology. It treats of this subject in a concise manner, this being comparatively a modern discovery. Following this the reader meets with consideration of inflammation, of the process of repair, and of supuration. From these the reader passes to the subjects of traumatic fever, ulceration and fistula, thrombosis and embolism, and many other infectious processes important to surgery, syphilis and tumors. Following these are the chapters on surgery of the vascular system, osseous system, on fractures and dislocations, on burns, on diseases and injuries of muscles and tendons, on deformities, on the nerves, on the joints, on the sympthatics, on the skin. These are followed by the chap-

ters on the surgery of the various regions of the body, amputations, &c. The book contains 1175 pages. The paper is excellent, topography all that can be desired and does credit to the pub-

pleasure to the yearly publication of this most popular book. ... will contain over 6,000 references to diseases and their remedies, carefully selected by thirty-six department editors from the most recent American and Foreign literature. Nothing has been left undone that would have added any merit to the work. It will be one of the most valuable works that has ever been given to the Profession, as well as the cheapest. The whole work will be arranged in encyclopedia form, with a Dictionary of New Remedies and a Dictionary of New Treatment. The value of such a work is at once manifest, for it will be the means by which one can see at a glance the progress made in any department of medicine. It can be unreservedly recommended to practitioners.

A Treatise on Surgery.

Moulin's Text-Book on Surgery was first published in April, 1891. So favorable was its reception by the medical profession and press that in a little over twelve months it was recommended at more than twenty medical schools, and the large edition that had been prepared was exhausted. So much for past history.

Early last summer we were fortunate in securing the services of Dr. John B. Hamilton, formerly Surgeon-General of the Marine Hospital Service, now Professor of Surgery at Rush Medical College, Chicago, as editor for a new edition. He has now almost completed his work, and within a short time we expect to place before you the book generally revised so as to represent Surgery as it is to-day, with a number of new and beautifully colored illustrations printed in with the text:

Our claim that Moulin's Surgery is the best text-book for the student and general work of reference for the practitioner is based upon the reviews of a large number of journals that have pro-

nounced it eminently practical, and upon the fact that so many teachers have seen fit to recommend it. But beyond this we may say that broad principles are stated in a clear, authoritative manner, that the relative value of the different subjects has been carefully considered, and that about the whole there is an air of responsibility that renders plain the fact that the author knows whereof he speaks, not only from his own experience, but from an acquaintance with American and foreign literature. There is also a uniformity of style, an elegance of diction, that attracts and interests the reader, while it makes plain the subject under discussion.

P. Blakiston, Son & Co., *Publishers*,
Philadelphia.

Books Received.

International Clinics. Vols. I. II. and III. Second series. J. B. Lippincott Co., Philadelphia, 1892. These three most excellent and valuable books will be reviewed in next issue.

Cheyne-Stokes Respiration.

In the early part of this century Cheyne, of Dublin, first observed a peculiar modification of the respiratory rhythm, which has since been known as Cheyne-Stokes respiration. This phenomenon of the breathing was not at once especially associated with disease of the muscular walls of the heart, but now it is considered by many as one of the characteristic signs of cardiac fatty degeneration. "It consists in the occurrence of a series of inspirations, increasing to a maximum, and then declining in force and length until a state of apnœa is established. In this condition the patient may remain for such a length of time as to make his attendant believe that he is dead, when a low inspiration, followed by one more decided, marks the commencement of a new ascending and then descending series of inspiration." Although this disturbance of the breathing is unattended by suffering during the suspension of the respiration, yet in some instances it gives rise to considerable distress at the period of commencing respiration.

A Pair of Post-Nasal Scissors.

BY JOHN DUNN, M. D., RICHMOND, VA.

The above cut represents a pair of Post-Nasal Scissors made by Bartlett, Garvens & Co., Richmond, Va. These Scissors will be found of service in the following cases—cases in which the usual forms of adenoid forceps and curettes are unsuitable:

1st. In the separation of adenoid adhesions to the eustachian tube-mouth, which adhesions are often so situated as to be out of the reach of any instrument with which I am acquainted.

2d. In the removal of adenoid masses where, owing to their duration or to constitution of the patient, the proportion of connection to lymph tissue is so great that these hypertrophies are extremely tough, and their removal with post-nasal forceps requires an undue amount of force and often brings away a strip of the mucous membrane adjoining the adenoids.

3d. In those cases where the adenoid development has been excessive and where the greater part of these hypertrophies have been removed with the curette or forceps, these Scissors will be found of advantage in trimming off the irregularities on the pharyngeal wall.

4th. In certain cases where the usual adenoid forceps might be used the Scissors will often offer advantages, which will be seen from the nature of the case.

These Post-Nasal Scissors have a handle similar to that of the Loewenburg's forceps, only lighter. They have the French lock. Near the finger rings is a guard to prevent over-action of the blades. The blades of the Scissors are ¾ inches long, are slightly curved with their concavity forward, and are rounded at the tips. In the above memtioned conditions, as in all cases where operations are to be done on the upper pharynx of persons over eight or nine years of age, the application of White's Palate Retractor is necessary, if the operation is to be done to the best advantage. Price, $3.50 net.

How to Choose a Subject for a Paper.

The physician is often at a loss to know what to write about and how to write when his subject is chosen.

What to write about should be determined generally by the diseases prevailing at the time the paper is read, and should be prepared while writer is treating the class of cases described in the

report. Such a paper is timely and will interest every man in the active practice of medicine. The writer will be interested and posted in his subject. If something new is not advanced, the best of the old will refresh the memory and be impressed anew.

Accidents and surgical reports are always in order, as well as reports on obstetrics and gynecology and special work.

The importance of the subject need not be considered, for no affection of the body or mind is too trivial for investigation, and, when written up intelligently, will be both interesting and instructive. The subject should be written up as we think it when we see the case and treat it. Directness and simplicity is the measure of strength of a report. The mind should not dwell upon what others will think of the report, but the facts as they occur and are observed in the case.

In papers, ordinarily, apologies and excuses are not in order. In the former case, if the report is a poor one, disappointment is added to the affliction, and in the latter case it sounds like, "I could have done better, but this is good enough for you." If an explanation is thought to be necessary from the character of the paper, let it be given verbally, and not incorporated in the body of the paper. Reporting just what is seen in a given case, with the plan of treatment and the results obtained, in a clear, concise manner, will not fail to get the attention of a society of medical men and benefit them, and strengthen the physician who makes the effort.—*Kansas City Medical Journal.*

Scarlet Fever; Its Treatment.

Dr. J. Lewis Smith calls attention to the recent investigations which seemed to show that the recent inflammations which occur as complications of scarlet fever are microbic, and says that whether these investigations have been exaggerated or not, it is most important to practice early and frequent disinfection of the nose and fauces in scarlet fever, whether mild or severe. The best substances to use are peroxide of hydrogen—one part to four of water for the throat and one part to eight for the nose, or corrosive sublimate—two grains to the pint, or some other non-irritating but sufficient disinfectant. Cold applications along the sides of the neck tend to reduce pharangytis and prevent suppuration. Dangerous nervous complications may be prevented by anti-

pyretic treatment. In all cases with high fever, accompanied by nervous symptoms, an ice-bag should be applied to the head, and kept there as long as the temperature is 103 deg. At the same time, at least when the temperature is 104 deg., the same applications hould be made to the neck. In asthenic cases, where there is a good active circulation, the limbs should be frequently sponged with cold water containing alchohol or vinegar. In asthenic cases, while cold is properly applied to the head, it should not be applied to the extremities. On the other hand, warm applications should be made in such cases. He considers aconite and phenacetin the two drugs to be used in scarlet fever with high temperature. Even these should not be used in malignant cases, characterized by dusk color of the skin, sluggish circulation, and feeble pulse. The dose of aconite recommended for a child of eight years is one drop every three hours. [A better way is to put ten drops in a glass of water and give a teaspoonful every fifteen minutes.—EDITOR.] Phenacetin may be used in doses of one grain for a child of two to five years. Bromides may be given when nervousness is pronounced. Cardiac tonics are indicated in scarlatina maligna. The patient should be kept in bed for two or three weeks.—*Southern Med. Record.*

A singular medico-legal case is reported by the Paris correspondent of the *Lancet.* At a recent meeting of the Societe de Medecine Legale an interesting communication was made, on behalf of Professor Cazeneuve, on a singular case of infanticide involving a somewhat unusual medico-legal problem. It was a question concerning an infant of five months which had died suddenly in 1891 without showing any previous symptoms of disease. At this time there was no suspicion of crime, and it was only owing to certain rumors, sixteen months later, that the police took action and caused the body to be exhumed. The chemical analysis for traces of arsenic, lead mercury and other poisons came to nothing. However, further research led to the discovery of eight small pieces of an elastic blackish-grey substance blocking up the intestinal track. After repeated washings and careful examination these were recognized as portions of sponge, and M. Cazeneuve was of the opinion that the ingestion of these fragments of sponge was the cause of death. In support of this opinion he cited the

customs which obtain in certain country districts of killing stray dogs and predatory cats by placing in their way small pieces of sponge soaked in grease, which, upon being swallowed by the animals, become swollen in the intestinal canal, after the manner of a sponge tent and thus induce fatal obstruction. Founding an opinion on these considerations, and also taking into account the fact that the portions of sponge presented a well-defined cut surface, the medical jurist concluded that circumstantial evidence was established that the child was caused to swallow the pieces of sponge in a vehicle such as milk or soup. The jury also took this view, with the result that the accused was sentenced to penal servitude for life.

Death Through Laughter.

A curious case of accidental death formed the subject of investigation before a coroner's jury recently, the ostensible cause of the fatality being the act of laughing, in which the deceased, at the London County Lunatic Asylum, was indulging at the moment of death. In company with two other attendants she was engaged in conversation, in the course of which an amusing story was narrated, the effect of which was to create irresistible laughter on the part of the deceased nurse, who, in the effort to repress her excessive mirth, bent forward as though to stifle it, and forthwith died. The post mortem examination subsequently made of the body showed that the cause of death was an accumulation of pericardial fluid, by which the free action of the heart was so much impeded that the extra strain produced by the attempt to stifle laughter resulted in its permanent cessation.—*Review.*

Strikes Among Medical Students.

There would seem to be an epidemic of strikes among medical students at present (Brit. Med. Jour.) Immediately after the news of the strike among the dressers and clinical clerks of the Paris hospitals, because of an alleged injustice to one of their body, comes the intelligence that the Barcelona students have "gone out" on account of the deficiency of clinical instruction, notably in the department of children's diseases. In this point they seem to have a real grievance, inasmuch as, while there is a professor, there are no patients, professor Rull, the former occupant of the

chair, had to be satisfied with three or four, but the present professor, Dr. Martinez Vargas, has, owing to administrative changes, been deprived even of these. It appears he asked for a special department with from forty to fifty beds, and it was the refusal of the authorities, on financial grounds, to consent to this, that was the immediate cause of the disturbance. Almost contemporaneouly with these effervescences of the youthful spirit in Paris and Barcelona, we hear of a "strike" among the students of the University of Athens, who have risen in revolt against a recent increase of the fees for examination and graduation. A deputation of students which waited on the Prime Minister to ask him to reconsider his decision seems to have been received with somewhat scant courtesy, and a good deal of disorder ensued. Several students were arrested.

The Care of the Hair.

Too much emphasis cannot be laid on the fact that the hair should be cared for intelligently, appropriately and regularly. It should be cleaned in tepid water once a week, and once a month—presuming there be no disease, like abundant dandruff or any other scalp trouble—with a mild solution of some simple alkaline substance like borax or bicarbonate of soda.

It is always better to wash the scalp and hair before retiring, as the opportunity for drying is better, especially if the hair is thick or heavy, and there is less likelihood of taking cold. Many of the finest suits of hair we have ever seen have been preserved and kept beautiful by the simple use of tepid or cool (not icy) water, the year round at morning toilet. As with every thing else so with the hair, good judgment must be the guide. The fine comb as an article of use for the hair, should never be thought of; the center of a hot fire should be the place for a fine comb. A good brush is the great tonic for the hair.

Some writers utterly prohibit the use of oil or grease on the hair; others unduly magnify the advantages of its constant applications; but between abstinence and unlimited use is the plan. Some hair is harsh and dry, do for it what you will; such hair requires the occasional application of oil; other hair is always oily and "just right;" for the latter very little "dressing" is required.

To keep a "heavy head of hair" is the desire and delight of every one. The law of heredity excepted, there is no reason or cause why so many should be bald or have thin or "patchy" hair. Carefully attending to the hair, having it trimmed at regular intervals, keeping the scalp clean, never allowing a barber to use any other than your own brush and comb in arranging your hair, avoiding the constant wearing of a hat—these are all contributing influences toward the preservation of the hair "e'en down to old age" and the grave.—*Med. and Serg. Reporter.*

An Old Story.

Whilst the following is rather old it will bear repetition, more especially as it points a moral which is obvious. The following story is told of M. Nelaton, the celebrated French physician. He had been attending the child of a French lady, and as he was taking leave, the grateful mother handed him a handsomely embroidered pocket book, which she explained to him she had worked with her own fingers, Nelaton bowed stiffly, and said, "Madam, the pocket book is quite a work of art, and I admire it exceedingly, but my fee is 2,000 fr." "Not more?" she answered. Then opening the leaves, she took out a little bundle of five 1,000 fr. notes, and from it selected two, which she presented to him, bowing stiffly in her turn, and retiring with the rejected pocket book and the remaining notes.—*Medical Review.*

There are no abnormal pulmonary physical signs associated with these respiratory phenomena. Such paroxysms, however, are not entirely confined to fatty degeneration of the heart, but occur in varying degrees of intensity with many cardiac affections and through periods of considerable duration. The primary cause of Cheyne-Stokes breathing seems to be a weakness of the heart muscles, in whatever manner produced; the secondary cause is located by some observers at the respiratory center, resulting from the lack of stimulus in the failing circulation.

Respiration of this description has been noted in apoplexy, in sunstroke, in uremia, in pericarditis, in peritonitis, in tumor of the brain, and in tuberculous meningitis. Consequently, this rhythmic agitation of the breathing is not, in the light of present information, a disease, but rather a symptom which depends upon a num-

ber of conditions that can seriously disturb the natural functions of the respiratory center. And, in view of this, the remedy for the paroxysm is, in the first place, the treatment of the organic disease upon which it happens to depend; and, in the second place, the indications are to stimulate the centers of respiration by the administration of such agents as the sulphate of strychnine hypodermatically.—*Post-Graduate.*

Antidolor.

The above is the name of a preparation to relieve pain, as its name implies, which is offered to the public with the best indorsements. But the only way to substantiate its claims is to give it a trial. "The proof of the pudding is in the eating thereof."

Memorizing Doses.

Dr. G. A. Wiggins gives the following rules:

1. The dose of all infusions is 1 to 2 ounces, except infusions of digitalis, which is 2 to 4 drachms.
2. All poisonous tinctures 5 to 20 minims, except tincture of aconite, which is 1 to 5.
3. All wines, from ½ to 3 fluid drachms, except wine of opium, which is 5 to 15 minims.
4. All poisonous solid extracts you can give ½ grain, except extract of calabar bean, which is 1–12 to ¼ grain.
5. All dilute acids, from 5 to 20 minims, except dilute hydrocyanic acid, which is 2 to 8 minims.
6. All aquæ, from 1 to 2 ounces, except aqua laurocerasus and aqua ammonia, which are 10 to 30 minims.
7. All medicated syrups you can give 1 drachm.
8. All mixtures, from ½ to 1 fluid ounce.
9. All spirits, from ½ to 1 fluid drachm.
10. All essential oils, from 1 to 5 minims.—*Pharm. Record.*

A GENTLE and pleasant laxative is found in the Seidlitz Dosimetric, made by the Philadelphia Dosimetric Co., Twentieth and Market Streets. A cathartic effect is obtained by giving it in sufficient doses. In this way, pushed to its fullest cathartic effect, it is a most successful treatment for peritonitis—far more satisfactory than the old-fashioned opium treatment.

Ch. Marchand's Trade Mark.

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PEROXIDE OF HYDROGEN

(MEDICINAL) H_2O_2 (ABSOLUTELY HARMLESS.)

MOST POWERFUL BACTERICIDE AND PUS DESTROYER.
ENDORSED BY THE MEDICAL PROFESSION.
UNIFORM IN STRENGTH, PURITY AND STABILITY.
RETAINS GERMICIDAL POWER ANY LENGTH OF TIME.

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NOTE.—Avoid substitutes—in shape of the commercial article bottled—unfit, unsafe and worthless to use as a medicine.

Ch. Marchand's Peroxide of Hydrogen (Medicinal) is sold only in 4-oz., 8-oz., and 16-oz. bottles, bearing a blue label, white letters, red and gold border, with his signature. Never sold in bulk.

GLYCOZONE.

PREVENTS FERMENTATION OF FOOD IN THE STOMACH.
MOST POWERFUL REMEDY FOR HEALING PURPOSES. CURES:

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Chemist and Graduate of the "Ecole Centrale des Arts et Manufactures de Paris (France).

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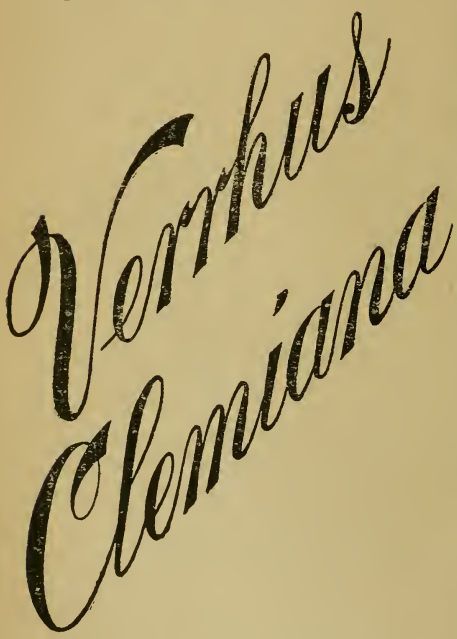
A Voice from the South.

THAT a greater variety of valuable MEDICINAL PLANTS are found in the SOUTHERN STATES than in any other section of this country, is a fact known to all physicians who have taken the pains to investigate the sources of our drug supplies. In fact, the South will hold her own, in this respect, with any other section of equal area in the world. She furnishes the principal laboratories of our own country with the bulk of their crude drugs, and even foreign manufacturers draw largely on her fields and forests for supplies of many valuable medicinal agents not found elsewhere. It is, therefore, not surprising that the discovery of a remedy that promises to revolutionize the treatment of Chronic or Constitutional Diseases (such as Syphilis, Scrofula, Rheumatism, Eczema, etc., etc,,) is announced from that quarter. The story of this discovery is charmingly told in a little book (for physicians only) entitled:



"A Voice from the South,"

which will be mailed free to any physician sending address to

The Clemiana Chemical Company,

ATLANTA, GA.

THE SEARLE & HERETH CO., whose advertisement appears in this Journal regularly, offers to send to any physician a sample bottle of their Tritica on application. We have used a great deal of this most excellent preparation and it is a pleasure for us to recommend it to the profession. Tritica is especially beneficial in the treatment of Pyelitis, Cystitis and Urethritis. In our hands it has proven to be far more effective than any other preparation in the treatment of this class of diseases. We hope that the readers of this Journal will give it a trial, and we feel sure that you will be pleased with its therapeutic effects.

A Misguided Temperance Apostle.

We regret to note that Francis Murphy, the celebrated temperance lecturer, is conducting a series of meetings in Cincinnati. We regret this because he is here to boom "the Keeley Cure" (?), for he ascribes "salvation from drink to the grace of God and the wonderful Keeley cure." Our impression is that if the former is inefficient, there is no use of trying the latter; and we decidedly object to the two being coupled together in the above sacrilegious manner. If there is anything on this footstool that the grace of God is not sufficient for, it must be the methods adopted by these institutions.

When it is known that one of the chief supporters of these meetings is a man who has purchased the right to use the "Keeley Cure" (?) in the State of Ohio, and that he is farming this privilege out for the sole purpose of gain, we say that we believe these meetings are a delusion and a snare, and that Francis Murphy is being used as a tool to increase the revenue from the Keeley institutes. We are in doubt as to whether Mr. Murphy knows this or not, but if he is cognizant of the part he is playing, he ought to be ashamed of the prostitution of his talents. There is nothing in common between Christianity and Keeleyism, and we advise all those who respect the former to avoid being led into these meetings. These meetings strike us as being for revenue only.—*Lancet Clinic.*

ALE and beef represent the nourishment of the sturdy old Britons, who laid the foundation of England's greatness. For two bottles of Ale and Beef address the Ale and Beef Co., New York, you mentioning this Journal and agreeing to pay express charges.

In speaking of the treatment of pneumonia by quinine and antikamnia, Prof. Palmer says: "The effects desired, and certainly, as a rule, produced, are a decided reduction of the temperature, a marked diminution in the frequency of the pulse, a decided moisture of the skin, or free sweating, a slower and more easy respiration, or relief from pain and the feeling of fullness in the chest, a diminution of the cough and of the tenacious and bloody character of the expectoration; and, in short, not only is there a checking of the fever, but of all evidence—general and local—of the pulmonary engorgement of inflammation.

The Latest Cholera Story.

A stranger arriving in Paris the other day, says the *Daily Graphic*, was accosted at the station by a man who stated that he was a sanitary agent. "Have you been disinfected?" he asked. "No," replied the traveller. "Very well, then follow me." And the "sanitary agent" led the way to a house in the rue Lafontaine, near the station. At his bidding the traveller entered a large bare room and took off all his clothes, which were taken away to be disinfected. Time passed; the traveller grew cold and impatient, tried the door, only to find it locked, and at last realizing that he was the victim of a new and ingenious form of robbery.

It is so often necessary to resort to local artificial support to relieve weak or over-taxed organs, that every physician should know where he can find, for any emergency, what he needs in the line of elastic goods, such as bandages, trusses and abdominal supporters, and of a reliable quality. It has been our misfortune on more than one occasion to have an article coming from a so-called reputable firm, go to pieces the first time it was applied, being absolutely rotten. Such accidents, however, have never been known to happen to any goods made by the Empire Manufacturing Company, Lockport, N. Y. They are always fresh and made out of material of the best quality. When anything in this line is needed it would be well to bear that in mind, and patronize a firm that always gives satisfaction.

PARKE, DAVIS & Co., Detroit, Mich., introduced almost every new remedy native to American soil.

Abstracts.

Ergotole S. & D. is steadily gaining in favor among the leading members of our profession and with reason.

Every obstetrician has experienced the annoyance and disappointment of giving a dose of Fluid Extract of Ergot to the parturient woman only to have it rejected by emesis. At best the patient objects to the taste of the Fld. Ext., and if actual vomiting does not occur, there invariably is produced a considerable nausea.

The nauseating constituents of the Ergot are removed during the process of manufacturing Ergotole, hence the most delicate stomach retains this product.

Another and most valuable feature of this preparation is its concentration. While the Fluid Extract or Normal Liquid presents but one grain of Ergot in each minim, each minim of Ergotole contains 2½ grains of select Spanish Ergot. Hence the dose is smaller. In cases of great emergency, as in post-partem hemorrhage, hematemesis, hemoptysis, or when the patient cannot swallow, or for any reason there is no time to be lost, we are assured that Ergotole can with perfect safety be used hypodermically, and that no fear of subsequent abscess need be entertained.

Our personal experience is that this preparation can always be depended upon to promptly exhibit the full action of Ergot, and to those of our readers who have not as yet made a critical study of Ergotole, we would suggest that samples will be gladly sent by Sharp & Dohme, the sole manufacturers of this preparation.

Please mention our journal when you write for samples and literature.

Coca is so well known and its properties are so universally recognized that it is unnecessary to dwell upon these subjects. What is not so well known, perhaps, is that Mariani & Co. make a wine which is not only pleasant to take but includes, as well, all the good properties of the plant in a palatable and efficient form.

The Elixir of the Three Chlorides is one of the best general alteratives upon the market, not to mention its invaluable properties in the treatment of syphilitic disorders. Messrs. Rentz and Henry have made a decided innovation in therapeutics by the introduction.

In diptheria the use of Pepsin as a solvent of the false membrane is by many clinicians highly recommended. Here, as indeed wherever Pepsin is indicated, purity and digestive power are of the utmost importance. It therefore follows that a pepsin free from septic contamination, that is perfectly soluble and of a high digestive standard, is to be prepared for this purpose, and the fact that one of the greatest living authorities on diseases of the throat endorses Webber-Pepsin S. & D. in diphtheria will go far toward establishing the supremacy of this product. Dr. Carl Seiler says:

Owing to the perfect solubility and superior digestive power of Webber-Pepsin, S. & D., this brand is the best adapted for preparing an efficient digestive fluid for use in the treatment of Diphtheria whenever it is desirable to remove the false membrane through the agency of Pepsin. Inasmuch as this ferment is capable of doing its best work in the presence of 0.02 per cent. absolute Hydrochloric Acid, a satisfactory vehicle may be prepared by dissolving 11 minims of Hydrochloric Acid C. P. in 4 fluid ounces of water. C. SEILER, M. D.

Philadelphia, January 19, 1893.

The Chester Sanitarium.

This is the name of a large Sanitarium that has lately been established in Chester, S. C. It is under the management of Drs. Marion & Henry, who are well known and are two of the most prominent physicians of South Carolina. A large institution of this kind, so thoroughly equipped, will be sure to meet with grand success.

The Clemiana Chemical Co. is meeting with much success in the introduction of Verrhus Clemaina, their new well-known alterative, anti-syphilitic and anti-scrofulous preparation. We would advise our readers to send for "A Voice from the South" and give it a careful reading.

Dukehart's Fluid Extract of Malt and hops, absolutely free from alcohol, for the cure of dyspepsia, debillity, all wasting diseases, and for the use of nursing mothers. Combining the highest per cent. of diastase to be obtained from Canada barley, together with the bitter principle of hops.

An Open Letter

From CHARLES MARCHAND, Chemist and Graduate ot the "Ecole Centrale des Arts et Manufactures, de Paris," (France,) to Prof. A. JACOBI, M. D., of NEW YORK, Published by the *Archives of Pediatrics*, January, 1893.

My attention has been called to an article read before the "American Pediatric Society," at Boston, May 4th, 1892, by Professor A. Jacobi, M. D., and published in the December number of *The Archives of Pediatrics*. This article is entitled, "Note on Peroxide of Hydrogen," and reports to be a "warning."

The learned writer in the beginning enters into a diatribe regarding proprietary medicines of all kinds, and endeavors, by an extravagant list of diseases, (many of which have never been mentioned by me as being connected with the subject,) to convey the impression that, peroxide of hydrogen (medicinal) is a "nostrum," and that the manufacturer of this article is to be classed among "quacks and patent medicine vendors."

He then commiserates the "immense number of unsophisticated medical men all over the country for their relative inability" to successfully "cope with the misery surrounding them," and intimates that the "trash" written regarding peroxide of hydrogen (medicinal) is not published for his hearers, who, being writers and teachers, are above the common horde of medical practitioners; with this compliment to his hearers and most uncomplementary reference to an "immense number" of his professional brethren, Dr. Jacobi proceeds to mention several cases of diphtheria, which having been apparently greatly relieved by the use of peroxide of hydrogen (medicinal), finally were cured under the use of lime water, as a spray and wash.

The inference drawn by the writer of the article in question is, that the peroxide was an "irritant" and had been of more harm than good.

It is not my province as a chemist to enter into a medical discussion with the learned doctor, but I would like to ask if, in his opinion, a case of diphtheria can be treated successfully with lime water only, and whether in the cases he cites, it is not possible that the peroxide treatment was an important element in the recovery of these patients. I would also inquire whether intemperate and in some instances personal illusions to myself and the preparation which I manufacture, are in all respects the outcome of professional investigation, and not the result of a desire to adver-

tise himself by discrediting a remedy of which the therapeutic value has been proved by thousands of physicians who, though they may be "unsophisticated" from Dr. Jacobi's standpoint, are nevertheless known as eminent and honored professional men, all over the world.

The drift of this article is seemingly an attempt to prove that Marchand's peroxide of hydrogen (medicinal) is injurious.

In confutation of this, I append herewith, in as concise a manner as possible, the experience of a few prominent physicians whose statements may be taken as conclusive in the sense that they are learned and talented professional men, the equals if not the superiors of the writer who challenges their experience, after having undoubtedly read their opinions, for every word I quote here has been published, and forms a prominent part of the medical literature of the day.

In confirmation of my sincere belief that the claims made by me of the character of my medicinal peroxide of hydrogen are true. I am willing to submit myself to a thorough test upon my own throat by spraying it with a twenty-five per cent. solution of Marchand's peroxide of hydrogen (medicinal) instead of a five per cent. solution as alleged to have been used by the learned doctor, for the same continuous number of days mentioned by him; and if any ulceration appears, or if the repeated aplications of the remedy "does give rise to actual diphtheria," as he states may be possible; then I am willing to acknowledge he is right. This test may be made at any time with the utmost publicity.

I make this proposition in good faith from a scientific standpoint, and will expect Dr. Jacobi to make the test in the same spirit or acknowledge that he does not desire to do so.

Fellow's Hypophosphites is one of the standard remedies which have been before the medical profession for a generation. Its efficacy has never suffered any impairment and it is as popular today as ever, its use being more widespread than ever.

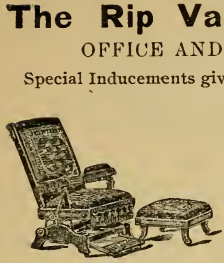
Wheeler's Tissue Phosphates is the name of an excellent preparation which is a real builder of the tissues. Since it was first made by Mr. T. B. Wheeler it has undergone ample trials and the results achieved by it have given universal satisfaction.

Every Physician in the World Should Read this Advertisement.

The Rip Van Winkle Reclining Rocker!

OFFICE AND GYNÆCOLOGICAL CHAIR COMBINED.

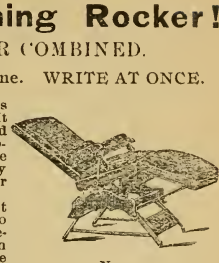
Special Inducements given to Physicians for a Limited Time. WRITE AT ONCE.



No. 1.

This is the most complete Physician's Chair ever offered to the profession. It combines a handsome leather-covered Office Chair and a first-class Gynæcological Chair, at less than one-half the price you would have to pay for any other first-class gynæcological chair alone.

The chair is first-class in every respect and fully warranted. It has over two hundred changes of position; it is noiseless in all its movements; the back can be lowered or seat tilted at any angle desired, with full weight of patient thereon, with the utmost ease.



No. 2.

As a Gynæcological Chair it will take any position shown, or any intermediate position, besides having newly-patented improvements, which make it without doubt the best and cheapest Office and Gynæcological Chair in the World.

This chair can be converted from a splendid office chair (see cuts Nos 1 and 3) into one of the most complete Gynæcological chairs in one-half minute (see cuts Nos 2, 4 and 5).

No. 3.

This chair is sold with or without the Gynæcological attachment, as desired. It is unquestionably the most complete and comfortable reclining or lounging chair ever made. We make a special price to physicians, and also give them a handsome commission on all orders we receive thr ugh them for chairs for their patients. No chair in the world is so well adapted to ladies suffering from female weakness, and the commission we give on your orders will soon pay for your own chair.

SEND 2c. STAMP FOR SIX ELEGANT COLORED ENGRAVINGS.

No. 4.

Showing the chair in different positions and different styles of upholstering, etc.; also circulars containing splendid testimonials from nearly every State and Territory in the U. S.

REMEMBER.

This chair has nickle-plated attachments and adjustable stirrups. You cannot buy as fine a Gynæcological chair as this of any other reliable make for less than $70 or $100.

No. 5.

The chair can be rigidly locked in any position. Physicians should order at once, as the special inducements we are offering only hold good for a limited time.

Manufactured by P. C. LEWIS MANUFACTURING CO.,

Box 229. CATSKILL, N. Y.

The World's Antipyretic, Analgesic and Anodyne.

EXCELLENT in all kinds of Headache. SAFE and SURE. Relieves Sciatica, Myalgia, Hemicrania, Typhoid Fever, and troubles due to irregularities of Menstruation. Works like a charm.

ANTIDOLOR

A GRAND SUBSTITUTE FOR MORPHIA.

AN ENTIRELY NEW COAL TAR DERIVATIVE.

Put up for Physicians in two forms—POWERED and 5 GR. TABLETS.

Samples of each sent on application.

Trade Supplied by United States and Canada Jobbers.

ANTIDOLOR CHEMICAL COMPANY, SPRINGFIELD, ILLINOIS.

PRICE, PER OUNCE, 75 CENTS.

Anderson Antiseptic Vaginal Capsules

FOR THE LOCAL TREATMENT OF

DISEASES OF THE VAGINA AND UTERUS.

The most efficient and cleanly means of introducing remedies into the vagina. Antiseptic, perfectly soluble and reliable. Each capsule contains an absorbent tampon which may be medicated with any remedy indicated.

WHEN?

In all cases of acute and chronic inflammation of the lining of the womb, gonorrhoeal, syphilitic, purulent and leucorrhoeal discharges.
Relaxation of the uterine ligaments and weakening of the vaginal walls.
Falling of the womb. Ulceration of the osuteri.
Diseases of the ovaries and fallopian tubes.
Painful and scanty menstruation.
Where the womb is extremely irritable and neuralgic.

HOW?

Moisten the tampon with the remedy, draw it back into the capsule by means of the linen thread, replace cap and insert.

WHAT?

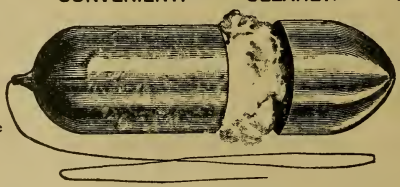
The result is a grateful relief to the sufferer and satisfaction to the physician. No handling of disagreable drugs; no loss of medication in the introduction, no soiling of linen.

THE VERDICT!!

RATIONAL. CONVENIENT. CLEANLY. EFFICIENT.

Three Sizes.

No. 1 Small
No. 2 Medium
No. 3 Large



Tampons.

Absorbent Cotton,
Oulo-Kutun (Wool and Cotton, or Wool,
as desired.

Exact size of No. 2 Capsule.

Any size by mail postpaid on receipt of price, 60c. per box.

VALUABLE AS A PESSARY.

Extract from a letter from Dr. A. J. Howe, Professor of Surgery, Eclectric Medical Institute, of Cincinntai, O.

"The Anderson's Vaginal Capsules charged with tampons of Oulo-Kutun are a convenient vehicle and medium for introducing douches or medicated fluids into the vagina, and retaining them there. Astringent, sedative and antiseptic liquids may be thus employed, instead of the syringe as an implement, or a speculum."

Respectfully, A. J. HOWE, M. D

☞ Send for printed matter containing valuable information.

THE HALL CAPSULE CO.

Manufacturing Chemists. **CINCINNATI, OHIO.**

Have you seen our "Ruby Capsule" for disguising the physical appearance of prescriptions, and for use when two medicines are to be taken in alternation? Send 10c. for trial box of 100.

It is Important

For the Physician to watch the character and quality of the remedies used in his prescriptions. Responsibility DOES NOT CEASE when the patient leaves the office; for impure, stale, or inferior preparations may be used without his knowledge. Personal examination of remedies prescribed—is the best check upon substitution.

Ferro-Salicylata Liquid.

MERRELL.

An eligible combination of Methyl Salicylate and Tinct. Citro-Chloride Iron, in a pleasant and permanent form.

Each Fluid Drachm Contains

True Salicylic Acid—from Oil Wintergreen (Methyl Salicylate), ... 5 grs.
Tinct. Citro-Chloride Iron, ...5 minims.

NOT SOLD IN BULK.

Ferro-Salicylata.—Merrell.

Ferro-Salicylata is especially valuable in that shade of disease peculiar to in anæmic, delicate, poorly nourished or broken down patients—usually aged people—children or youth—but met with in all ages. In adults, and often in children when the disease is not plainly chronic, there will be a long series of recurrences with intervals of doubtful health. It may also be employed in acute articular rheumatism, and in some cases of acute tonsillitis, especially where the diagnosis is at first in doubt between rheumatic angina and diphtheria, also in acute rheumatism and rheumatic affections generally.

Ferro-Salicylata may be used in combination with the Iodides and Bromides of Potassium and Sodium. Associated with the former, it will prove an admirable alterative and tonic in secondary syphilis attended by a debilitated condition of the general system. It also combines well with Chlorate Potassium, the Hypophosphites, Fowler's Solution the vegetable bitter tonics, either in Fluid Extract or Tincture Form.

Ferro-Salicylata and all other preparations of this Company reach the laity through professional channels only, we therefore avoid entering into the minute details of their application, leaving the physician to make such practical use of our therapeutic notes as in his judgment may be best suited to individual cases.

Ferro-Salicylata may be obtained of wholesale druggists throughout the United States, of our Eastern Office, 96 Maiden Lane, New York City, or direct from the Laboratory.

Please designate "Ferro-Salicylata—MERRELL."

ELIXIR

Pinus Compositus.

MERRELL.

Each Fluid Drachm Contains

White Pine—fresh Bark.....2½ grs.
Balm Gilead Buds..... 2 grs.
Spikenard..... 2 grs.
Cherry Bark ....1¼ grs.
Ipecac..... ¼ gr.
Sanguinarina Nitrate..... ...1-64 gr.
Morphine Acetate'''..... 1-16 gr.
Ammonium Chloride..... ½ gr.
Chloroform..... ½ minim.

NOT SOLD IN BULK.

Elixir Pinus Compositus.—Merrell.

An admirable combination of well-known and highly approved medicinal agents; recommended in acute, chronic and capillary bronchitis—in ordinary coughs and colds, and wherever a "routine" expectorant is suggested. In the troublesome cough following "La Grippe" it proved invaluable—many of our correspondents looking upon it as a "specific" in this stage of the disease.

CAUTION.—Physicians are reminded that the Elixir Pinus Compositus of this manufacturer is wholly unlike the many syrups, etc. under different names, and the difference will be readily appreciated when tried. In testing the physical properties of the Elixir Pinus, note especially its delicate taste and perfect freedom from the oder of rank syrup, the drastic, harsh and repulsive characteristics of the crude blood root, and other coarser ingredients, characteristic of comepeting preparations.

"Merrell Co.'s" "Green Drug," Fluid Extracts, True Salicylic Acid. Salts of Hydrastis, Fluid Hydrastis, and Specialties may be obtained of wholesale druggists throughout the United States, at the Home Office at Cincinnati, or the New York Office, 96 Maiden Lane, New York City, Richards Drug Co., San Francisco, Agents for Pacific Coast. Prices current and printed matter cheerfully supplied.

THE WM. S. MERRELL CHEMICAL CO.

CINCINNATI. NEW YORK.

MURRAY DRUG
Columbia, S. C.

DR. B. BAER,
Charleston, S. C.

Please notice in this issue a letter by Mr. Marchand, which is an able reply to a paper read by Dr. Jacobi before the American Pediatric Society at Boston last May and which was published in the December issue of The Archives of Pediatrics. It seems to us that Dr. Jacobi's paper was an unjust condemnation of Marchand's Peroxide of Hydrogen. In looking up the literature on this subject, we find that the Doctor is entirely by himself in condemning this most excellent medicine. We prescribe a great deal of Peroxide of Hydrogen in our practice, with satisfactory results, and we believe that Marchand's is the best brand on the market.

Varied Uses of the Newer Antipyretics.

Introduced as modifers of temperature some of the medicaments of the aromatic schema appear to have been especially useful in the multiform conditions presented to the general practitioner. Phenacetine, especially, is widely called for in daily practice, and it seems to have given good results even in obstinate conditions. In sciatica, for example, Dr. J. D. Blake [Medical World Oct.] directs the use of this medicament. He gives iodine, colchicum, etc., for the constitutional manifestations and Phenacetine for the pain. He writes: "Give Phenacetine, grs. V when the pains are severe. A few doses will suffice. Try it." Professor Hare [Cell. & Clin. Rec., Aug.] gave, in the treatment of supra-orbital neuralgia cod liver oil, adding Phenacetine, grs. V three times daily. Dr. W. Minaker [Med. World Sept.] says: "An excellent combination for the treatment of malaria, and one which answers equally well with the large doses of quinine, is Phenacetine, quinine and salol, of each 2 grs., repeated every 5 hours." A noticeable feature in the above instances of medication by Phenacetine is the small size of what seems to be considered an effective dose of Phenacetine. Dr. Porter [La Sem. Med. Nov. 19, 1892], recommends Phenacetine as a substitue for preparations of opium. He gives it in 2½ grain doses in combination with minute quantities of salicylic acid, cocaine and exalgin. Probably the Phenacetine alone, in 5 grain doses would be better, as salicylic acid is not usually well borne, and some practitioners do not like to prescribe cocaine in simple conditions.

Hayden's Viburnum Compound is a most excellent preparation and is endorsed by the most prominent members of the profession.

MAYERSVILLE, MISS., March 6th, 1892.

Albemarle Chemical Co.—Gentlemen: Some time ago I received several sample doses of your Therapine through the mails. I have tried it in a case of sick headache, with good results.

Yours truly, W. H. SCUDDER, M. D.

The Sanitarian.

1873—Twenty-First Year.—1893.

The Sanitarian is a Monthly Magazine devoted to the promotion of the art and science of sanitation, mentally and physically, in all their relations; by the investigation, presentation and discussion of all subjects in this large domain, as related to personal and household hygiene, domicile, soil and climate, food and drink, mental and physical culture, habit and exercise, occupation, vital statistics, sanitary organizations and laws; in short—everything promotive of or in conflict with health, with the purpose of rendering sanitation a popular theme of study and universally practical.

"The Sanitarian is the best Sanitary publication in America" (*Mississippi Valley Medical Monthly*); and "has accomplished more good than all of the other Sanitary papers put together"(*Hydraulic and Sanitary Plumber.*)

$4 a year in advance; 35 cents a number; sample copies 20 cents —ten two-cent postage stamps.

The Sanitarian is published in New York; The American News Company, General Agents. News dealers will get their supplies from them.

☞All correspondence and exchanges with the Sanitarian, and all publications for review should be addressed to the Editor, Dr. A. N. Bell, Brooklyn, N. Y.

There are some interesting points in physiological chemistry in the attractive advertisement of Mellin's Food in this issue, which our readers will do well to peruse. The authorities cited give the remarkable results of recent investigations in this field.

Listerine has made a proud record for itself during the late St. Louis epidemic of what was called typhoid fever. By virtue of its antiseptic properties it enabled all those cases in which it was used to make speedy and complete recovery.

A Voice from the Artic.

Dr. F. A. Cook, who was with Lieutenant Peary on his famous North Greenland Expedition, and which resulted in the closest approach to the pole yet attained' writes the following letter to the Antikamnia Chemical Co., which will be of interest as showing how an approved product becomes far-reaching in its work.

NEW YORK CITY, N. Y., 338 W. 55th St., NOV. 2, 1892.

Gentlemen:—The Antikamnia which you sent for use in the North Greeland Expedition, I used with gratifying results

For Rheumatism, Neuralgic pains, as well as the pains which accompany the Grippe, it has no equel.

Yours repectfully.

F. A. Cook; M. D.,

Surgeon and Ethnologis of the North Greenland Expedition.

Caffacemon Tablets is a most excellent preparation for headache, neuralgia and rheumatism, as well as menstrual pain, etc. Ordinarily most of the common remedies and many of those placed on sale by manufacturing pharmacists, are followed by depression and other ill effects. Caffacemon is a most efficacious remedy and utterly devoid of any unpleasant action following its administration. Read the offer to physicians on another page made by the S. B. Medicine Company, South Bend, Indiana. They will send you a quantity of five staple pharmaceuticals, the only consideration is that you mention this journal and pay transportation charges.

Julius Fehr, the Baby Powder man, makes the "Hygienic Dermal Powder," and is useful as a general sprinkling powder for infants and all affections of the skin. Its properties are antiseptic, antizymotic and disinfectant. It is sold by the drug trade everywhere at 25 and 50 cents a box. Always ask for Fehr's Compound Talcum and take no other.

You can easily add to your popularity and usefulness by following the instructions given by the McArthur Hypophosphite Co., in this issue. Their Syrup is a standard and reliable preparation. It is not a conglomerate mass of poly-pharmacy as some others in the market, but embodies the valuable therapeutical properties of the Hyposhosphites ot Lime and Soda, without objectionable ingredients.

THE BEST ANTISEPTIC

FOR BOTH INTERNAL AND EXTERNAL USE.

LISTERINE.

Non-Toxic, Non-Irritant, Non-Escharotic—Absolutely Safe, Agreeable and Convenient.

FORMULA.—LISTERINE is the essential antiseptic constituent of Thyme, Eucalyptus, Baptisia, Gaultheria and Mentha Arvensis, in combination. Each fluid drachm also contains two grains of refined and purified Benzo-boracic Acid.
DOSE.—Internally: One teaspoonful three or more times a day (as indicated), either full strength, or diluted, as necessary for varied conditions.

LISTERINE is a well-proven antiseptic agent—an antizymotic—especially useful in the management of catarrhal conditions of the mucous membrane, adapted to internal use and to make and maintain surgical cleanliness—asepsis—in the treatment of all parts of the human body, whether by spray, injection, irrigation, atomization, inhalation, or simple local application, and therefore characterized by its particular adaptability to the field of

PREVENTIVE MEDICINE—INDIVIDUAL PROPHYLAXIS.

LISTERINE destroys promptly all odors emanating from diseased gums and teeth, and will be found of great value when taken internally, in teaspoonful doses, to control the fermentative eructations of dyspepsia, and to disinfect the mouth, throat and stomach. It is a perfect tooth and mouth wash,
INDISPENSABLE FOR THE DENTAL TOILET.

DISEASES OF THE URIC ACID DIATHESIS.

LAMBERT'S LITHIATED HYDRANGEA.

RENAL ALTERATIVE—ANTI-LITHIC.

FORMULA.—Each fluid drachm of "LITHIATED HYDRANGEA" represents thirty grains FRESH HYDRANGEA and three grains of CHEMICALLY PURE Benzo-Salicylate of Lithia. Prepared by our improved process of osmosis, it is INVARIABLY of DEFINITE and UNIFORM therapeutic strength, and hence can be depended upon in clinical practice.
DOSE.—One or two teaspoonfuls four times a day (preferably between meals.)

Close clinical observation has caused Lambert's Lithiated Hydrangea to be regarded by physicians generally as a very valuable Kidney Alterative and Anti-lithic agent in the treatment of

Urinary Calculus, Gout, Rheumatism, Cystitis, Diabetes, Hæmaturia, Bright's Disease, Albuminuria, and Vesical Irritations Generally.

REALIZING that in many of the diseases in which LAMBERT'S LITHIATED HYDRANGEA has been found to possess great therapeutic value, it is of the highest importance that suitable diet be employed, we have had prepared for the convenience of physicians

DIETETIC NOTES,

suggesting the articles of food to be allowed or prohibited in several of these diseases. A book of these Dietetic Notes, each note perforated and convenient for the physician to detach and distribute to patients, supplied upon request, together with literature fully descriptive of LISTERINE AND LAMBERT'S LITHIATED HYDRANGEA.

LAMBERT PHARMACAL CO., St. Louis, U. S.

British, Canadian, French, Spanish, German and South American Trade Constantly Supplied.

Miscellaneous.

Notice.

The Quiz class conducted by Dr. Joseph Collins, of New York, will organize for its winter's work on October 1st, 1892.

Students prepared for their college, hospital, and State examinations. An average of 50 per cent. of the members of this quiz class are successful in securing hospital appointments.

Preparation for the positions in the Army, Navy, and Marine services a specialty.

A general direction of a student's studies from the beginning will be assumed when desired. Students beginning the study of medicine can, for a small extra charge, sign under Dr. Collins as their preceptor, and have all responsibilities assumed. Frequently young men coming to New York to study medicine waste a good portion of their first year by not knowing what to do and how to go about it. An experienced quiz master obviates this.

The class has always been composed of Southern men and references can be made to physicians in almost every State of the South. Correspondence solicited.

Address, DR. JOSEPH COLLINS,
153 Lexington Ave., New York City.

CHICAGO, ILL., January 12th, 1892.

THE SEARLE & HERETH CO., Chicago, Ill.

Gentlemen:—I have given the *Tritica* a fair trial in several cases of irritation of the bladder and uretha, especially those involving tee postate, and am so pleased with its action that I regard it as a valuable adjuvant to the armamentaria to the relief of those troubles. Very Respectfully, E. H. PRATT.

E. Fougera & Co., N. Y., Agents for Rigand & Chapoteaut, Paris: France. The preparations are: Vin de Chapoteut, a typical nutritive stimulant; Apioline, a reliable emmenagogue; Ferrum Sanguinis; Morrhoul—the activc principles of Cod Liver Oil and Santal-Midy—used in cases of gonorrhea. See ad.

Peptonized Cod Liver Oil and Milk as made by Reed & Carnrick is an ideal preparation of cod liver oil. Give it a trial. It will please and never disappoint.

Sanmetto—Its Action.

I am well pleased with the effects of Sanmetto. It acts in the way of reducing enlarged prostate glands of old men, and corrects the habit of frequent micturition during the night, which is very harrassing. It also builds up the wasted testicles; also the glands of females. In fact, Sanmetto is a rejuvenator of the whole system.

Girard, La. BENJ. MYRICK, M. D.

"Dietz Tubular Driving Lamp" is made on the well-known tubular principle. The walls being made double, form an air chamber into which the air passes at the top, and through it to the inside of the burner in a continuous current, and the hot air and products of combustion pass from the burner straight up through the central tube to the open air. As no air goes directly to the burner from the outside, the lamp will not go out in the strongest wind. The lamp can be fastened to the middle of the dash, by means of a spring on the back, or by using the "Dietz" patent attachment it can be fastened on the side of dash instantly without trouble, and securely. Advantages claimed: It throws all the light straight ahead, 200 feet or more. It can be attached instantly to the end or side of the dash. It burns with a clear, white flame. It does not smoke or smell. It is handsome and durable. It will not blow out. It burns kerosence. This lamp is sold by George W. Morris, 251 Smith Street, Brooklyn, N. Y.

Messrs. Parke, Davis & Co., the great manufacturing pharmacists, of Detroit, Mich., will be pleased to furnish descriptive literature regarding their invaluable products. The name of Parke, Davis & Co. is a sufficient guarantee to thousands of practising physicians not only in America, but elsewhere, of fresh, reliable and trustworthy products of the grandest pharmaceutical establishment in the world—one that cannot afford to send out anything but the best.

ALBEMARLE CHEMICAL CO., Nashville, Tenn.—*Dear Sirs:* I am using Therapine daily in la grippe, neuralgia and acute rheumatism, with the most gratifying and satisfactory results.

I am yours truly, F. O. YOUNG, M. D.

Gonorrhea.

I take pleasure in reporting the favorable results I have had from the use of Sanmetto. So far my experience has been confined to its use in gonorrhea, in which disease I have found it a prompt and pleasant remedy.

Baltimore, Md. CHARLES E. SADTLER, M. D.

Fluid extracts should always be purchased in original, unbroken packages, put up by the manufacturer, and not filled out by the wholesale druggist from bulk stock. The manufacturers label affords equal protection to buyer and seller, and places beyond controversy all questions as to the identity of the article or its quality. The Wm. S. Merrell Chemical Co., are so strenuous on this point that they discourage the purchase of their Green Drug Fluid Extracts from jobbers who write labels, and refuse to carry in stock fractional pounds put up by the manufacturer. Their position is the outgrowth of many years experience, and physicians and druggists who favor their preparation will not accept fluid extracts in any other packages than those received intact as sent out from their laboratory.

Robinson's Elixir Paraldehyd possesses many of the good without the evil qualities of chloral. It is a most excellent preparation for insomnia resulting from nervous causes.

Some New Features In Parke, Davis & Co.'s List.

Among recent additions to the list of Parke, Davis & Co., whose constant endeavor is to add to and improve their manufactures, are the following: Fluid extract Cocillana, the Bolivan remedy for respiratory inflammations. Compressed tablets of Calomel and Sodium Bicarbonate, 2½ grains each. Tablet triturates of ext. Cascara Sagrada, 1 grain. Antiseptic tablets R "C." Gelatin-coated pills—Terpine Hydrate, 5 grains; also Strychnine Nitrate $\frac{1}{10}$ grain. Pill of Aloes and Iron, 767, R "A," half-strength. Normal liquid Golden-seal. Improved Bronchial Lozenges. They also now prepare Liquid extract Cascara Sagrada, B. P.; Fluid Aloes Co. for dec. aloes co., B. P., Fluid Sarsa Co. for dec. sarsa co., B. P.; Fluid Gentian Co. for inf. gentian co., B. P.; Fluid Rhei for tinct. rhei, B. P.

Jambul in Diabetes.

I wish to thank you for a suggestion from you which I saw some months ago. You said you had found Jambul good for saccharine diabetes. I had a case and was grasping for straws. Got some of Parke, Davis, & Co.'s Jambul. The symptoms commenced to disappear a tonce, and soon the thirst, excessive diuresis, and many other unpleasant symptoms were gone. Since last month has taken no treatment, and eats whatever food she wants. It should be better known by the profession.—V. E. Lawrence, M. D., in *Philadelphia Times and Register.*

Every physician needs a good surgical chair, and with some it is an indispensible article, beside being an elegant piece of office furniture. If you will write to the W. D. Allison Company at Indianapolis, they will send you terms, etc., on their surgical chairs that cannot fail to satisfy you. To those desiring it, they will sell on easy payments so that every doctor can avail himself of an opportunity to purchase. We speak knowingly of the above firm when we say you will find them pleasant, affable and in every sense fair and reasonable. Say you saw their advertisemennt in this journal, and ask for a catalogue of physician's chairs and combination cabinets, with prices and terms.

AKRON, OHIO, July 9, 1892.

THE AMERICAN CEREAL CO., Akron, Ohio:

Dear Sirs:—Our little Hilda weighed but five pounds at birth. Her development during the first six months was about normal. Being deprived of her natural food at that time, we began to feed her almost exclusively on her grandpa's Infant Food, then in its experimental stages. This food has been the greater part of her diet up to the present time. At two years of age she is a plump, active, healthy, happy child, and weighs twenty-six pounds, over five times her weight at birth. Her digestion is perfect, and she usually sleeps twelve to thirteen hours every night without awakening. Yours truly, F. A. SCHUMACHER.

Notice the advertisement of the Antiæostine Chemical Co., of Newton, N. C. Their preparation is certainly a fair one, and we hope our subscribers will take advantage of it.

The San Francisco Society for the Prevention of Cruelty to Animals.

SAN FRANCISCO, CAL., September 28th, 1892. Dr. L. P. Britt. 37 College Place N. Y.

Dear Sir:—Enclosed please find postal money order, No.37,747, for which send me two five inch driving bits same as last ordered. I have given the bit one trial. I used it on a confirmed puller that required two strong men to drive, they alternating as they became exhausted. After a few efforts the animal succumbed, and I could drive him with slack lines.

Yours truly, NATHANIEL HUNTER, Secretary.

Why delay in sending for the AUTOMATIC SAFETY BIT after reading the above letter, which is the highest authority and indorsement in the world as to the Bit's grand merits and humane power. These societies are advocating the use of, and selling the Bits.

The Anderson Vaginal Capsules are designed for the introduction of medicated tampons into the vagina, and are convenient, simple and cleanly; they prevent the medicament from being pressed out from the absorbent cotton during introduction; thus gainiug the advantage of retaining the full strength of the ingredient used and avoiding the annoyance to the patient of exposure or soiling the underlinen. They can be used in all cases of diseases of the vagina and cervix uteri for exhibiting local remedies, and also act as a capital support to the uterus in prolapsus, malposition and relaxation of uterine ligaments and antonicity of the vaginal wall. Unlike mechanical pessaries, they do not cause irritation, congestion, chronic inflammation, or uncomfortable feelings; but they have both curative and healing properties, with facility of application. I have used them for some time now, and find them superior to any other means I have yet tried for local medication, and as a support to the uterus; for any known remedy can be employed, whether astringent, sedative, antiseptic or alterative. I have used them with success in leucorrhœa, vaginitis, ulceration of cervix uteri, etc.; and have found them eminently serviceable. I beg to call the attention of gynecologists and general practitioners to the great advantages of these capsules over all other forms of local medication.—*M. K. Hargreaves, M. D., in London Lancet.*

John Barry.

We take pleasure in calling the attention of the profession to the superior quality of thermometers made by the above manufacturer. He defies competition.

The Dream of Ovary.

When the window pane is broken, how demure and quiet all the boys are. No one has done it, and each looks in such innocent wonder at his neighbor that it seems almost cruel to ask questions. The only unpleasant aspect of the affair is the fact of the damage done. Everything else is so refreshingly guiltless that we are almost thankful that the alleged accident has happened, in order that the innateness of the good should become so strongly accentuated, says the *Medical Record.*

So it is with the discussion concerning reckless surgery recently held in one of the leading dailies. The charge has been made, with no reason of course, that surgery is becoming too invasive. If anyone believes that such is possible he has merely to read the conservative interviews and be at once disabused. With the incoming year each and all of us will hail this radical change in opinion with becoming joy.

What glad news this will be for the little ovary, which can now uninterruptedly carry on its particular home industry instead of becoming domesticated into the pickling-jar of the progressive gynecological pathologist. Its commonor and multiplied diseases will vanish, the innocent cysts will no longer be apolegetically demonstrated, and operative statistics will dwindle. The peritoneum will no longer be a thoroughfare, and the surprised gut less seldom twist its bashful coil from the light of day, or join in unnatural alliances of advanced intestinal anastomosis. The vermiform will gladly retire to private life; the wandering kidney will be more likely to stay at home, and even the gall-stones will elbow their faceted sides through the dark tunnel of the common duct in the good old-fashioned style, only to be lost in the harmless embarrassment of a delayed stool. Let us hope, then, that the surgical millennium is coming, that the knife shall be turned into spoon, that the pill shall once more have its right of way, that the ovary shall hereafter peacefully wrap the drapery of the

broad ligament about her and lie down to pleasant dreams of families yet to be.—*Medical Review.*

The Treatment of Stammering.

For some reason or another the treatment of stammering has never received the attention it merits at the hands of the profession. Its victims are left to fight their way as best they can, and should they dream of better things they are fain to apply to one or other of the quacks—this is perhaps, a harsh name to apply to some of them—who profess to cure a distressing or disabling infirmity. It is, indeed, a reproach to the medical profession that the treatment of a functional defect of this kind, in the majority of instances, more or less amenable to rational measures, should have been abandoned to outsiders. A good deal has been written with respect to the etiology of stammering, but it is obvious that the want of co-ordination between the different factors of articulate speech may result from an imperfection in any one of them, and the possible causes of stammering are thereby multiplied almost indefinitely. The least promising cases are evidently those in which the embarrassment is due to what one may term an intellectual chorea. Even in these, however, immense improvement is possible by combined mental and physical training. Moreover, the psychological deficiency is often more apparent than real, and may merely be the result of years of exaggerated self-consciousness created by a ridiculous defect. In other cases the co-ordinating center seems simply to get out of gear. An attack of whooping cough or measles, a fright or some strong emotion, may determine a hesitation which can only be overcome by a course of training. We have recently had an opportunity of witnessing some really remarkable and prompt "cures" of stammering in both children and adults by suitable training, and these results fully justify the claim we have advanced for a greater share of attention.—*Medical Press.*

We have had an oportunity recently to examine the goods manufactured by the Tyer Rubber Co., and it is a pleasure to us to recommend them to the profession. Their combination water bottle and fountain syringe is certainly one of the most complete we have ever seen.

Chronic Gout.

Mr. H. L. has been a sufferer of gout for a number of years. His attacks come on irregularly, and several joints are involved. He also suffers from dyspepsia, palpitation of the heart, insomnia and other nervous disturbances. His pain is not very severe, but severe enough to keep him from work. His attacks of gout have lasted as long as three months, but since he has taken Henry's Tri-Iodides he is able to get around much sooner.

DR. C. J. RADEMAKER.

During the past year we had under care a young lady, the daughter of the mayor of a neighboring city, whose life was being greatly marred by a painful affliction of the eye, which had baffled the skill of several of the leading oculists of this country and Europe. It was finally decided to be due to a peculiar uterine condition. Only a few such cases have been known. She was altogether cured of the trouble which had existed for over four years, by tablets of Ponca Compound.—Ed. *Mass. Med. Journal* Boston.

WASHINGTON, D. C., April 13, 1892.

The Febricide Pills arrived at an opportune moment, and I at once administered to my wife, who had been suffering two days with the La Grippe Pain in her head. I gave her, every four hours, a pill, and ten of them completely cured her. I divided the others, relieving two other patients. I pronounce its curative action in La Grippe wonderful. J. W. F. WILLIAMS, M. D.

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Castration Before Marriage.

The following appeared some time ago in a contemporary: The courts of Birmingham have been occupied with a very curious affair. A Dr. Malins, having performed an exploratory laparatory on a young lady, and having found nothing abnormal, closed the abdomen, leaving the ovaries *in situ*. The year following, still suffering, the patient addressed herself to Mr. Lawson Tait, the celebrated, who, having opened the abdomen, removed one ovary. He did not remove the other because he could not find it. The patient made complaint against Dr. Malins, accusing him of having removed an ovary without her consent, and was supported in the charge by Mr. Tait. Dr. Malins denied the accusation, saying he had removed nothing. The court was embarrassed. If the judge had been a Solomon he would have ordered the abdomen in question slit open a third time; but he was not a Solomon and was much perplexed. Happily in the meantime the young woman, who had married, became *enciente*, much to Dr. Malins' delight and to Mr. Tait's discomfiture. History saith not if Mr. Tait promised to be more reserved in the future.

Bellevue Hospital Medical College, in consequence of the loss of some of the best teachers by resignation, and by death, and also on account of the injustice shown to a student last year, we are told has a much smaller class this year than usual. We are glad to learn that the Commissioners of Charities and Correction are no longer to sign the diplomas of this institution, which gave it a quasi endorsement unjustifiable. Autocrats deserve no place in the medical profession; they should be identified and excommunicated wherever found, whether at the head of medical colleges or in society work.—*N. Y. Med. Times.*

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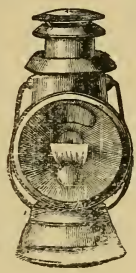

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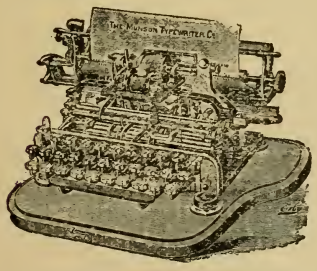

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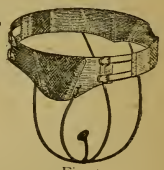

Fig. 4.

Fig. 1.

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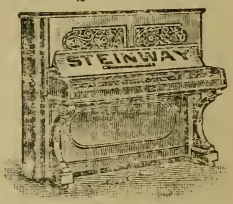

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Charlotte Medical Journal.

VOL. I. CHARLOTTE, N. C., MARCH, 1893. No. 9.

Original Communications.

On Certain Animal Extracts—Their Mode of Preparation and Physiological and Therapeutical Effects.

A Lecture delivered at the New York Post-Graduate Medical School and Hospital, January 16th, 1893, by William A. Hammond, M. D., Surgeon-General U. S. Army (retired), late Professor of Diseases of the Mind and Nervous System in that Institution.

GENTLEMEN:

I wish I could believe all the pleasant things that my friend, Professor Rossa, has, in the goodness of his heart, just said about me. There are two expressions of his, however, which I know to be true. First, I scarcely need any introduction here, for though I have been away from you for more than four years, I feel that I am, if only for an hour or so, back among my own people, and I experience something of the emotions of the captain who walks the quarter deck of his ship. Second, I am one of the founders of this school. I shall always regard that fact as the most honorable of all the events of my professional life—the one in which I take the most pride. The excellence of the work done here by the faculty and the phenomenal success that has attended upon their labors are circumstances of which they may well feel a justifiable elation and in which emotion I claim the right to share.

But I am not here to-day to speak of the triumphs of this school. I want to tell you of some of the work upon which I have been engaged since I left you and the story will, I think, interest a body of physicians like yourselves who come here to learn new facts and thus to keep abreast with the progress of the age. You remember that about three and a half years ago Dr. Brown-Sequard electrified the medical and non-professional world by announcing that the expressed juice of the testicles of the guinea pig was an agent capable when injected into the blood of arresting to some extent

the inroads of old age and of curing certain diseases to which mankind is subject. I at once entered upon a series of investigations of the matter, some of the results of which are published in the New York Medical Journal for August 13th, 1889. I became convinced that we had in the juice of the organs in question a means of acting upon the body in a manner and to an extent different from that of the effects of any other substance previously known to medical science.

But, though surprising in its action, I found that there were certain practical difficulties in the way of the fresh testicular juice ever becoming of general use in actual practice.

In the first place it had to be used fresh, for if not, there was great danger of a putrefactive process being set up and blood poisoning produced, and this was the result in several cases in which it was used in this country. In large cities there is almost an impossibility of getting the organs in question immediately on their being removed from the animal.

Secondly, it was extremely difficult to filter the thick juice, even when diluted according to Brown-Sequard's directions. Filtering paper would not do, for the morphological constituents passed through and an abscess was very liable to be produced at the point of injection. A porous stone filter absorbed the juice and none of it came through, as there was never a sufficient quantity to saturate the stone and to pass through it. A large amount could not properly be made at one time, as it would not keep, so that it was necessary at every seance to prepare a fresh quantity.

After a time, therefore, during which I did my best with the fresh juice; using for this purpose the testicles of the ram and creating several abscesses with febrile disturbance, I gave up this method and turned my attention to preparing extracts not only of the testicles but of other organs of the body. It would be to some extent instructive to go over my failures, but I have not time for that. I can only on this occasion tell you of my success and the conclusions I have arrived at in regard to the subject. And I shall mainly confine my remarks at present to the consideration of one extract, that of the brain, which for convenience I designate "cerebrine." I will merely say that I have prepared extracts also of the spinal cord, "medulline"; the testicles, "testine"; the ovaries, "ovarine"; the pancreas, "pancreatine"; the stomach, "gastrine",

and the heart, "cardine," and that I am nearly ready to give to the profession the results of my observations with these substances. Of course the kidneys and liver being excretory organs, can not properly be used for the purpose of making extracts to be introduced into the blood. Were we to use them in this manner we should be putting back into the system poisons which it had eliminated, and hence would produce disaster, and, perhaps, even death.

The process of preparation of the extract of these several organs, while individually somewhat different, does not materially vary from that used for the brain, which is as follows :

The whole brain of the ox, after being thoroughly washed in water acidulated with boric acid, is cut into small pieces in a mincing machine. To one thousand grammes of this substance placed in a wide-mouthed glass-stoppered bottle, I add three thousand cubic centimeters of a mixture consisting of one thousand cubic centimetres each of a saturated solution of boric acid in distilled water, pure glycerine and absolute alcohol. This is allowed to stand in a cool place for, at least, six months, being well shaken or stirred two or three times a day. At the end of this time it is thrown upon a porous stone filter through which it percolates very slowly, requiring about two weeks for entirely passing through. The residue remaining upon the filter is then enclosed in several layers of asceptic gauze, and subjected to a pressure of over a thousand pounds, the exudate being allowed to fall upon the filter and mixed with a sufficient quantity of the filtrate to cover it. When it has entirely filtered it is thoroughly mixed with the first filtrate and the process is complete.

During the whole of this manipulation the most rigid antiseptic precautions are taken. The vessels and instruments required are kept in boiling water for several minutes and are then washed with a saturated solution of boric acid. Bacteria do not form in this mixture under any circumstances; but it is necessary to examine it from time to time microscopically, in order to see that no foreign bodies have accidentally entered. Occasionally, owing to causes which I have not determined, though I think it is due to variations in temperature, the liquid becomes slightly opalescent from the formation of a floculent precipitate. It sometimes takes place in a portion of the extract kept under apparently identical conditions with other portions that remain perfectly clear. It can be entirely

removed by filtration through Sweedish filtering paper, previously sterilized, without the filtrate losing anything of its physiological or therapeutical power.

Five minims of this extract diluted at the time of injection with a similar quantity of distilled water constitute a hypodermic dose.

The most notable effects on the human system of a single dose are as follows—though in very strong, robust and large persons, a somewhat larger dose is required, never, however, exceeding ten minims :

1. The pulse is increased in the course of from five to ten minutes, or even less in some cases, by about twenty beats in a minute, and is rendered stronger and fuller. At the same time there is a feeling of distention in the head, the perspiration is largely increased, the face is slightly flushed, and occasionally there is a mild frontal, vertical, or occipital headache or all combined, lasting, however, only a few minutes.

2. A feeling of exhilaration is experienced which endures for several hours. During this period the mind is more than usually active and more capable of effort. This condition is so well marked that if a dose be taken about bedtime wakefulness is the result.

3. The quantity of urine excreted is increased, when other things are equal, by from eight to twelve ounces in the twenty-four hours.

4. The expulsive force of the bladder, and the peristaltic action of the intestines are notably augmented, so much so that in elderly persons in whom the bladder does not readily empty itself without considerable abdominal effort, this action is no longer required, the bladder discharging itself fully and strongly, and any existing tendency to constipation disappears, and this to such an extent that fluid operations are often produced from the rapid emptying of the small intestine.

5. A decided increase in the muscular strength and endurance is noticed at once. Thus, I found in my own case that I could "put up" a dumb-bell weighing forty-five pounds fifteen times with the right arm and thirteen times with the left arm, while after a single dose of the extract I could lift the weight forty-five times with the right arm and thirty-seven times with the left arm.

6. In some cases in elderly persons an increase in the power of vision is produced, and the presbyoptic condition disappears for a time.

7. An increase in the appetite and digestive power. Thus, a person suffering from anorexia and nervous dyspepsia is relieved of these symptoms, temporarily at least, after a single dose hypodermically administered.

These effects are generally observed after one hypodermic injection, and they continue for varying periods, some of them lasting for several days, In order that they may be more enduring, as may seem necessary, one in the morning and one in the afternoon, and kept up as long as the case under treatment seems to require. The most notable effects are seen in the general lessening of the phenomena accompanying advancing years. When some special disease is under treatment, the indications for a cessation of the injections will be sufficiently evident, either by an amelioration or cure.

To the substance obtained in this manner and held in solution, I have given, as stated, the name of "Cerebrine" as the one, in view of its origin, most appropriate.

I have employed the solution of "Cerebrine" with curative effects in many diseases of the brain and vervous system, It is almost specific in those cases of nervous prostration—the so-called neurasthenia—due to reflex causes or excessive mental work, or persistent and powerful emotional disturbances. A hypodermic injection of five minims, twice daily, continued for two or three weeks, and without other medicine, being sufficient to produce cure. It has proved equally effectual in cases of cerebral congestion, in which the most prominent system was insomnia, sleep being produced usually in the course of two or three nights. I have also employed successfully in migraine, hysteria, melancholia, hebephrenia—the mental derangement occurring in young people of either sex at the age of puberty—in old cases of paralysis, the result of cerebal hemorrhage. In neuralgia, sciatica, and in lumbago, it has acted like a charm, except in one case of facial neuralgia, in which it did not appear to be of the slightest service.

I have employed it in eleven cases of epilepsy. Three of these were of the *petit mal* variety; in two the effect has been so marked that I am not without the hope that cures will result, although I am not able, as yet, to speak postively on this point, the patients having been less than a month under treatment. In the other, no influence appeared to be produced.

Eight cases were of the *grand mal* variety. In two of these the number of paroxysms has been reduced more than one-half, and greatly mitigated in severity. In six other cases which were of long duration I could perceive no curative effects.

In a case of general paresis no therapeutical influence was apparent beyond that of arresting the dilusion of grandeur for a few days. In a case of hebephrenia, however, occurring in the person of a young lady eighteen years of age, the effect has been most happy, the symptoms entirely disappearing in a little more than a month's treatment.

In several cases of nervous prostration, the result of long-continued emotional disturbances, and in which there were great mental irritability, dyspepsia, physicial weakness, loss of appetite and constipation, relief was rapidly afforded. In three other cases in which the most notable symptom was functional cardiac weakness, the effect has been all that could have been desired. In these cases it was employed in conjunction with "Cardine," the extract of the heart of the ox, made in the manner already described.

It is not my intention at the present time to bring before you all the points of this interesting subject, or to allude further to experments in the treatment of other diseases, which are not yet concluded. In the near future I shall enter more largely into the consideration of the matter in all its details. I will only add now that I have used with excellent results in cases in which it seemed to be indicated, the extract of the testicles of the bull and also that of the pancreas of the ox, and these investigations also will be given to the profession at an early day. The first named of these —"Testine"—I have found to be the greatest efficacy in the treatment of sexual impotence when it has been the result of venereal excesses, and in cases of too frequent nocturnal seminal emissions.

It has recently been alleged by some medical authorities, that there is no difference in the physiological or therapeutical action of medicines, whether they be introduced directly into the blood by hypodermic injections or taken into the stomach, but it is scarcely worth while to seriously combat this asertion. For while it may be true that some substances are not altered by the gastric juice before they are absorbed into the system, it certainly is not true of many others, and it surely is erroneous as regards those of animal origin. Indeed it is, I think, doubtful, capable of being

acted upon by the gastric juice and of being absorbed into blood gets into the system in exactly the same form in which it got into the stomach. And I am very sure that all organic matters, without exception, undergo radical changes under the action of the gastric juice, in some cases amounting to decomposition and recomposition.

It is well known that Woorara, the virulent arrow poison used by the Indians of South America, and which is invariably fatal to animal life when injected into the blood, is inocuous when taken into the stomach, even in very large quantity. I have ascertained, by actual experiment, that the poison of the rattlesnake may be swallowed with impunity. During the course of my medical sevice in the army on the Western plains, I have collected a large quantity of rattlesnake poison. A small fraction of a grain of this injected hypodermically was sufficient to kill a dog in a few minutes, while previously the same animal had been made to swallow a half a drachm without the production of any apparent result. Experiments made with the saliva of hydrophobic animals prove that it is rendered harmless by the action of the gastric juice. The vaccine virus may certainly be swallowed with impunity, as has been shown by repeated experiments upon animals.

Relative to the animal extracts to which I am now referring, I have ascertained beyond question that if they are inclosed in capsules so as to reach the stomach without coming in contact with the mucous membrane of the mouth, they are absolutely without physiological or therapeutical effect so far as can be perceived, even when given in quantities of a teaspoonful or more, but if dropped upon the tongue in double the quantity used for hypodermic injection and allowed to remain in the mouth without being swallowed —thus avoiding the action of the gastric juice—they are absorbed and exert a slower but still decided effect, though nothing comparable to that produced when they are administered hypodermically.

Now, gentlemen, a few words in regard to the theory upon which these animal extracts exert these remarkable effects. I have thought a good deal upon the matter and I think I have arrived at something like the truth. But after all a theory, even when supported by indisputable facts, is not a matter of so much importance as the facts themselves. And it is better if you are sure of your facts to have an erroneous theory than none at all. The one I

am going to propose is, I think, in accordance with physiological law, and I believe that it will strike your minds as being based on common sense, and as being sufficient to account for the observed phenomena. Briefly stated, it is as follows:

Organic beings possess the power of assimilating from the nutritious matters they absorb, the peculiar pabulum which each organ of the body demands for its developement and sustenance. The brain, for instance, selects that part which it requires; the heart, the material necessary for its growth and preservation, and so on with the liver, the lungs, the muscles, and the various other organs of the body. No mistake is ever committed; the brain never takes liver-nutriment, nor the liver, brain-nutriment; but each selects that which it requires. There are, however, diseased conditions of the various organs in which this power is lost or impaired, and as a consequence disturbance of function, or even death itself, is the result.

Now, if we can obtain the peculiar matter that an organ of the body requires and inject it directly into the blood, we do away with the performance of many vital processes which are accomplished only by the expenditure of a large amount of vital force.

Let us suppose a person suffering from an exhausted brain, the result of excessive brain-work. Three hearty meals are eaten every day; but no matter how judiciously the food may be arranged, the condition continues. Now if we inject into that person's blood a concentrated extract of the brain of a healthy animal we supply at once the pabulum which the organ requires. Then, if under this treatment the morbid symptoms disappear we are justified in concluding that we have successfully aided Nature in doing that which unassisted she could not accomplish.

All this is applicable, not only to the brain, but certainly to the heart, the generative system, the spinal cord, and I believe other organs of the body. I have repeatedly seen a feeble heart rendered strong, the blood corpuscles increased in number, and the color of the blood deepened by the use of Cardine, and I have many times seen an exhausted sexual system restored to its normal power by the use of Testine, Cerebrine and Medulline.

Such is the system, and yet I am not quite sure that it is entirely new. I recollect reading nearly forty years ago an account of some observations made by, I think, a German physician, relative

to the treatment of diseases of the several organs of the body by a system of diet, consisting of the corresponding organs of healthy animals. Thus, liver-diseases was treated by beef's liver, heart-disease by beef's heart, brain-disease by beef's brain, and so on. My memory seems to be clear on the main point, but I have searched in vain for the paper to which I refer. The fact, however, that the various foods in question were cooked and were taken into the stomach constitutes a great difference with the system which I am now discussing, both physiologically and therapeutically, and the results do not admit of comparison. The germ of the idea, however, is the same, and I cheerfully yield to my unknown proto-observer whatever distinction may be claimed on the score of priority.

And while I have been conducting my observations others have been at work in the same direction, but their investigations do not seem to have led to any very definite results, or to have been systematically carried out. Generally they have been performed with the fresh juice of the organs, and, although at first sight this method would appear to be preferable to any other, experience shows that it is, as I have said, not unattended with danger, and I have certainly ascertained that extracts made with glycerine and pressure, extemporaneously, are absolutely without effect, either physiologically or therapeutically.

And now, gentlemen, I commend this whole subject to your serious attention. I shall leave a quantity of Cerebrine with Dr. Leszinsky for distribution among you. I only ask that you will communicate to me the results of your observations.

Pneumonia.

BY W. E. FITCH, M. D., GRAHAM, N. C.

Pneumonia is considered by Osler [Osler's Practice of Medicine, '92] to be an infectious disease, characterized by inflammation of the lungs and constitutional disturbance of varying intensity. The fever terminates abruptly by crisis. Secondary infective processes are common. An organism, the diplococcus pneumoniæ, is invariably found in the diseased lung tissue. The cause or relation of atmospheric temperature is considered by Boker [Gazetta Degliospidali, No. 56] to be fully established. After his elaborate study of over eight thousand cases, he believes it a general law

applicable throughout the world. The pathological anatomy of the blood in croupous pneumonia is described by Kikodze [Lancet March 21, '91]. He found that the relative and absolute quantity of white blood corpuscles increased two or three times. In severe cases, which result fatally, this increase is not observed. The increase of the white blood corpuscles takes place at the expense of an increased amount of over-ripe elements. This change in the blood occurs at the same time as, or even before, the change in the lungs, and continues without observable decrease until the crisis. Generally the increase of the number of white corpuscles and of an over-ripe matter keeps pace with the temperature. A crisis in the blood takes place simultaneously with the temperature crisis. The amount of white blood corpuscles becomes rapidly normal or even subnormal, also the over-ripe matter. In fat or very severe cases, no increase was found, as a rule; however, the increase began even before the physical signs of pneumonia could be detected. The microbes of pneumonia have been studied by Banti [Lancet, March 21, '91], who found the diplococcus lanceolalus present in every one of fully seven cases of fibrinous pneumonia. The main point in his researches seems to be the well-nigh invariable presence of this microbe in lobar pneumonia, not only in the exudation in the lungs and pleuræ, but often, and probably always, also in the blood, and variations in the intensity of the disease depend on differences in the virulence of the microbes.

The diplococcus pneumonia of Frænkel, Pasteur and Sternberg is the most constant organism in lobar pneumonia, and is now believed by many competent authorities to be the specific agent of the disease. According to Nettus' observations, it is present in 20 per cent. in the buccal secretions of healthy persons. It persists for months or even years in the saliva of persons who have had pneumonia.

According to the dominant view, pneumonia is an infective disease caused by this diplococcus of Frænkel, which has its seat of election in and produces its chief effects on the lung tissue, and which can, under favorable circumstances, invade other parts of the body—endocardium, pleuræ and meninges. This microbe may possibly attack these parts without the intervention of inflammation in the lung tissue, as it has been found in meningitis and pleurisy, independent of pneumonia.

On this view pneumonia may be regarded as a local disease, which is produced by micro-organisms, which induce, as in other local diseases, such as erysipelas and diphtheria, constitutional disturbance of varying degrees of intensity. The diplococcus pneumonia occurring in the milk of a woman afflicted with pneumonia is described by Bozzolo [Weimer Med. Wochenschrift, Aug. 15, 1891]: A woman nursing a child five months of age was attacked by a pneumonia crouposa sinistra, which later extended to opposite lung, followed by endocarditis and ended in lysis; cultures of milk pressed from the breasts on the fifth day of the disease gave rich cultures of pneumococci.

Reeently G. & F. Kemplar [British Med. Journal, Sept. 14, 1891; Edinburg Med. Journal, Nov. 1891] have made experiments which were confined to rabbits, and revealed that every nutrient medium in which the pneumococcus had been cultivated, would, if innoculated, render an animal immune against the pneumonic-septiamia even after the cocci had been removed by filtration. The immunity would rarely last more than six months and would be transmitted to offspring born within this period.

The prevention of pneumonia has been carefully studied by Foa [London Med. Recorder, Feb. 20, '91], who has made further researches concerning immunity than perhaps any one else has, obtained against pneumonia by inflicting an attenuated culture of the diplococcus pneumonæ. Foa has obtained by means of the sulphate of ammonium a precipitate from the culture in broth. This being repeatedly filtered, a substance is obtained which, introduced in sufficient doses during three or four days into the blood of rabbits, so modifies the constitution of the animal that it cannot be innoculated with the diplococcus of Frænkel. It would be a great gain in prognosis could we recognize the approaching danger some time before the end is upon us, and thereby diminish the number of so-called unexpected deaths in pneumonia, and so lessen the reproach that prognosis is one of the weakest points in our science. The weak and elderly, as well as those addicted to the use of alcohol, must be given a guarded prognosis, for assuredly no general rule founded on shattered constitutions will apply. The same may be said of the subjects of bronchitis and emphysema. In my opinion, dullness on percussion with tubular breathing is to be regarded as unfavorable when it occurs very early in the dis-

ease. A continued high temperature of 104 F. from the first is suspicious, and if it reach 105 F. deg. for two successive days, without any material decline, must be considered as highly dangerous. Marked rising pulse at this time is a warning not to be mistaken; while the same phenomenon on the third day may have no real significance, a steady, increasing rapidity of the pulse rate during the sixth, seventh or ninth days almost invariably ushers in unfavorable symptoms. A constantly increasing area of dullness on percussion, after the sixth day, is decidedly ominous.

Delirium is unfavorable in the main, and especially so if constant throughout the day and night, and if occurring early during the attack.

The analysis of the urine is of prognostic value to the physician. The quantity of albumen is of considerable prognostic value, and those cases which commence with a severe gastro-intestinal attack are twice as liable to end fatally as those which exhibit the usual signs. The heart is *the* danger point in pneumonia, acknowledged by all of our best physicians, but as to the mechanism of this danger, all are not agreed as a means of dilating the cutaneous blood vessels and producing diaphoresis. Spts. nitrous ether, Dover's powder, or spts. of mindererus, and the warm bath at 95 deg. F. are par excellence and a further means of relieving the heart and the diversion of the venous blood to the liver. A reservoir, capable of holding a great quantity of blood, and a great quantity of blood passing to the liver will increase its functions, among which may be mentioned destroying these poisonous principles in the blood.

With this end in view I would suggest the use of Calomel, Tr. Aconite and Tr. Veratrim Viride, which are usually and most always followed with good results. In the heart failure, so often the cause of death in pneumonia, Thomas [Lancet-Clinic, Sept. 5, 1891] recommends the use of strychnine 1-26 of grain given hypodermically every six hours. He believes that the strychnine acts directly on the muscles of the right side of the heart in the same manner as Tr. Digatalis. A tolerance of this drug appears to exist in pneumonia, and the dose must be large and frequent to secure decided results. In croupous pneumonia I have combined the Tr. Digatalis and Strophanthus in large doses three times a day, with the best results.

In the treatment of pneumonia we have no specific. In cases of moderate severity a purely expectorant plan may be followed—keeping the bowels open, regulating the diet, and, if necessary, giving a Dover's powder at night to procure rest, and enveloping the chest in a cotton batting jacket covered with oiled silk.

In severe cases a symptomatic plan should be followed, meeting the indications as they arise. The first distressing symptom usually is the pain in the side; if severe, may be relieved by the hypodermic injection of 1-8 of gr. morphia or by local depletion cupping; and here also the old household remedy, mustard plasters, acts very pleasantly and effectually.

In many cases the propriety of venesection comes up as a factor in the treatment, but in my opinion, where the Calomel and Tr. Aconite are used, venesection will not be needed. With these remedies we can direct the venous blood to the liver and relieve the right heart without scaring our patients and timid female friends with bloody and useless venesection. The reproach of Van Helmont, that "a bloody Moloch presides in the chairs of medicine," cannot be brought against the present generation of physicians. During the first decades of this century the profession bled too much, but for the past two years we have bled too little. But with the above-named drugs, a knowledge of their physiological actions, and the pleasing results following their administration, the use of the lancet is growing less each year and will soon be a thing of the past. Calomel, in the opinion of Smakovsky, [La Lemain Medicale Monthly, Sept. 16, 1891] is capable of aborting fibrinous pneumonia. Its therapeutic effect is not due to the direct action of the mercury on the pulmonary lesions, but to a general antiseptic action of the medicine, which destroys the toxic matter circulating through the blood, and thus aids the existence of the organism against the local morbid process. The doses must be given in gr. doses every hour till the purgative effect is produced, which will generally be after the fifth dose is given, which will be followed by a lowering of the temperature and a diminution of other morbid symptoms. This amelioration of symptoms will rapidly be transformed into a crisis, without symptoms of collapse and rapid recovery of the patient. Delirium in pneumonia, when due to an active hyperæmia of the brain, is best treated by ice to the head, bromide of potassium or sodium,

or paraldehyde and Tr. Aconite. When delirium of anæmia origin, all remedies of neurasthenic action find a place—perhaps opium takes the lead. The progressive cardiac weakness is, after all, the most important enemy to fight in pneumonia, and is emphasized by the old axiom, "*Sine pulsa nulla, therapeia.*"

This is doubtless in part caused by the fever, but much more important is the toxic action of the poison produced in the course of the disease, and to these must be added a third—fasten the distention of the right side of the heart. Again, unfortunately, we have no specific to combat these toxic effects, but the general experience of physicians points to alcohol, in the form of good French brandy, as the only trustworthy remedy, although some of our cotemporaries hold that alcohol is not indicated. I believe it is, in many instances, the only remedy capable of tiding a patient over this dangerous period of the disease, and I order it administered in tablespoonful doses every three hours to adults, and children in proportion, and have been highly pleased with its action.

When the pulse becomes small, frequent, feeble or very compressible, and when the heart sounds—particularly the second pulmonic sound—begin to lose their force, strychnia, as I have before stated, is of great value here as a heart tonic. Aromatic spirits of ammonia is another cardiac stimulant which I often employ in connection with alcohol, when the failure of the circulation is due to the toxic effects of the bacilli, and I find it an important adjunct to alcohol at the crisis, in pneumonia. Expectorants are rarely of much use after the first two or three days of the disease, nor in the stage of resolution can they be said to be of much service. In cases of tardy resolution I use the carbonate of ammonium with Syrup Tolu. Reiss highly lauds pilocarpine at this stage.

Special attention to regimen here forms an important and essential part of the treatment. The diet should be light and made up of articles which, while nourishing, are not heavy and not apt to induce flatulency—milk, beef juice broths, milk punches, egg-nogg, etc.

All complications should be met such as symptoms demand.

PARIS, KY., Nov. 24th, 1892.

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Respectfully, W. H. CONRAD, M. D.

The Simple, Septic, Traumatic and Specific Forms of Cervicitis and Its Treatment.*

By Bedford Brown, M. D., of Alexandria, Va., President of the Southern Surgica, and Gynæcological Association, Ex-President of the Medical Society of Virginial and Member of the Medical Examining Board, Member of the American Medical Association.

In practice I have found four well-marked and distinct forms of cervicitis, all arising from different causes and each presenting in certain respects peculiar characteristics and pursuing a different course. In accordance with the etiology of these four forms of cervicitis I will designate them as the simple, septic, traumatic and specific.

This classification will tend to a clearer understanding of the nature and treatment of each form. The revelations of investigation will clearly establish the fact that all cases do not arise from a common cause and present features in common. This arrangement of the various forms of our subject will enable us to comprehend more clearly the etiology of each form, its true pathology and appropriate treatment. I am impressed with the opinion that all those pathological phenomena observed in the diseased cervix, as endometritis, hyperæmia, engorgement, hyperplasia, erosion, ulceration, are due originally to inflammatory action as a basis of morbid influence arising either from simple, septic, traumatic or specific causes, and that we should in our differentiation of these different forms of the disease be fully alive to the importance of these facts as necessary to the election of appropriate methods of treatment.

Simple Cervicitis.—This form of cervicitis invariably originates from non-infectious causes. A very common cause is the action of exposure to cold during menstruation. It not unfrequently arises from excess of venery in the married and unmarried. I have not unfrequently been called to treat cases in the unmarried and virtuous which I was satisfied arose from ungratified sexual emotion. In the past twelve months I have had under my care two pure and virtuous young females, the subjects of violent and painful cervicitis, who had the misfortune to have been the victims of protracted marital engagements in which both were disappointed. These are delicate questions to discuss, but they exert an important influence

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on uterine pathology. The cervix uteri is manifestly an erectile organ, which function causes it to be brought into active sympathy with the ovaries and mammæ, and brings it into active and intimate relations with the sexual emotions, and when there is overstrain of the female organs, either from abuse or neglect, this erectile tissue is exceedingly liable to become congested, engorged, inflamed and to pour forth muco-purulent matter from the natural outlet, the cervical endometrium.

Another and common cause of simple cervicitis is the effect of tight-lacing and the pressure of heavy skirts on the pelvic organs. Every pound of weight and pressure exerted on the abdominal organs causes just that much displacement of the pelvic organs. The normal uterus has about an inch and a fourth of play of motion in the pelvis. Place a woman on her back, insert the finger in the vagina and cause her to cough, and your finger will easily detect this play of motion. On the contrary, place a woman in tight stays, bound around with heavy skirts, in a similar position and perform the same operation, and you will find that the cervix is forced down in the vagina and firmly fixed on the perineum, where it is subjected to constant friction and irritation.

Congestion, inflammation and hyperplasia are the inevitable results. The very term simple cervicitis denotes that the disease is of simple origin; that its pathology is uncomplicated; that its effects are limited; that it is incapable of conveying infection, and that it exists purely as a local affection.

The symptoms of simple cervicitis in the acute stage are usually pain sometimes referred to the bladder, or vagina, but very often to the lower rectum.

I have had more than twenty cases, in which the patients referred the aching, unbearable pain to the rectum, supposing themselves to be affected with hæmorrhoids, when an examination of both rectum and vagina revealed a swollen, enlarged, tender, hot cervix, pressing down on the sphincter.

I find this class of cases specially often in virgins, who have been the subject of tight-lacing and long engagements. This pain is usually temporarily relieved by the recumbent position and aggravated by the erect. It is frequently so severe as to debar the patient from exercise. In another case the clinical thermometer inserted into the vagina will indicate 101° of temperature.

Menorrhagia and metrorrhagia I have found in a certain proportion of cases to indicate the existence of cervicitis. There are certain cases of menorrhagia and metrorrhagia that are due alone to simple cervicitis, and when the inflammation and engorgement of the latter are relieved, the hæmorrhagic symptoms disappear. Internal hæmorrhoids in the female are not unfrequently the result of the pressure of a swollen, inflamed, enlarged cervix on the circulation of the rectum and its paralyzing effect on the sphincter ani. Lastly, it is proper to say that there can be no pelvic lymphadenitis, no endometritis, no salpingitis arising from simple cervicitis and no pelvic peritonitis or abscess. I have found in practice that we rarely meet with the simple form of cervicitis in the acute but usually in the sub-acute or chronic form.

Treatment of the Simple Form.—In the past much importance has been attached to the idea that endocervicitis is the original cause of this affection, and that our principal remedial measures should be addressed to that feature alone. A long experience leads me to believe that this is a mere symptom of a conservative character, or a sequence rather than a cause, and is a mode of depletion adopted by nature to rid the circulation, overloaded and engorged, of its redundancy of white corpuscles in the form of pus, and in this way preventing what would otherwise inevitably become abscess of the cervix. For a long time I attached much importance to the treatment of endocervicitis and purulent discharges until I found by practical experience that it effected but little, when my views were confirmed by the publication on this subject of that eminently practical gynæcologist, Dr. Emmet. Now I reverse my method and let nature go on in her efforts at relief while I endeavor to act upon the engorged circulation and hyperplasia and inflamed condition of the cervix, with much more satisfactory results and more permanent progress, and I feel sure that I am acting on the cause rather than the results of disease. When purulent, or muco-purulent discharges are in continuous progress from mucous membranes wherever situated, you rarely find abscess in nearly contiguous tissues. This is nature's own method of preventing abscess.

In a highly sensitive, tensely engorged and inflamed cervix it is trifling away time and opportunity to begin treatment by means of iodine, carbolic acid or nitrate of silver. Vascular tension must

be relieved and decidedly reduced as a preliminary measure to local application, or much of our labor is lost. Where the active engorgement and inflammatory action has been in part reduced, the way is paved for local treatment, and our progress will be infinitely more rapid. This partial reduction of hyperæmia can only be accomplished by local depletion of the cervical circulation, either sanguineous or serous. I infinitely prefer the latter method. In this practice I now make it a rule to alternate my depletion and astringent, or alternative treatment every second or third day. The glycerine or boro-glycerine tampon of Sims is introduced and permitted to remain one day. The next day following the cervix will be found much paler and less engorged and somewhat higher in the pelvis, and in a condition to receive the application of Churchill's tincture of iodine. In two days more there may be some return of engorgement, but less inflammation when the serous depletion by the glycerine tampons will again be repeated, and so on to the end. All of this time during this alternate treatment it will be found that the engorgement and inflammation are being steadily reduced, the dimensions of the cervix diminished and the muco-purulent discharge will decline until final restoration. I attach less importance to the warm douche in the treatment of cervical disease than formerly, but now use it mostly for purposes of cleanliness. By this method of treatment I economize time, labor, suffering and money to the patients—matters of much importance.

In those cases of cervicitis arising from descent of the organ in the pelvis and pressure on the lower rectum, elevation of the entire uterus must be practiced to ensure success. The glycerine tampon systematically applied will do much in the gradual process of elevation and in the relief of rectal pain.

There is a certain class of cases of cervicitis in which the uterus is bound down by adhesions, the cervix much inflamed and swollen rests low down on the perineum and presses down on the rectum and sphincter ani that cannot be relieved without elevation of the entire organ in the pelvis. The method which I have practiced in these cases is by a gradual system of elevation by means of graduated pessaries. This method, because of the slow and gradual manner in which it is performed, can cause no evil result whatever. I begin that process of gradual elevation carefully, cautiously and systematically with a cotton glycerine tampon packed into the cul-

de-sac firmly, which is re-applied every alternate day for ten days. Then a Hodge or Smith pessary, with the curve corresponding to the sacrum, almost angular so as to jut up under the cul-de-sac is inserted. But the pessary in point of dimensions and form must be such as not to give the least inconvenience. Then the process of progressive elevation is commenced and a graduated system of pessaries is resorted to by inserting every week a pessary the eighth of an inch larger, carrying out the graduated system of treatment by gradual elevation of the organ until the final object is accomplished.

Septic Cervicitis.—The history of this form of cervicitis is far more complicated than the former. It originates alone from septic infection and becomes in time a source of septic infection to tissues connected by circulatory or lymphatic communication. Its cause is to be found in the contact of putrescent animal matter, while passing through the cervical canal in the form of portions of putrid decomposing placenta, threads of membranes or coagula, the results of regular labor, abortion on menorrhagia. The cervix is supplied with lymphatic vessels which communicate freely with lymphatic vessels and glands in the tissues of the pelvis. Septic matter passing through the cervix induces septic inflammation and vascular engorgement. Then it is through this channel of the cervical and pelvic lymphatics that septic infection is absorbed and transmitted to the lymphatic glands of the pelvis. There it is for a time arrested and sets up inflammatory action in the form of genuine pelvic lymph-adenitis. That usually involves the neighboring cellular tissue in the inflammatory process, and may or may not result in suppuration and abscess in the roof of the pelvis. I am convinced that the cases which we have heretofore designated pelvic cellulitis are really genuine instances of pelvic lymph-adenitis.

It is impossible for septic matter to be absorbed into the cervical lymphatics without setting up inflammation of these vessels in the form of lymphangitis. Hence septic cervicitis is nothing more or less than cerveical lymphangitis. Lymphangitis of the cervix means the continuous generation of septic poison and its transmission through the communicating lymphatic vessels and its lodgment in the lymphatic glands of the pelvis, and the developement of pelvic lymphadenitis inducing serious septicæmia and supperation.

Another channel through which septic infection from this form of cervicitis may reach the system is through the cavity of the uterus and fallopian tubes, creating supperative inflammation in its travels.

In the early stages of septic cervicitis complicated with pelvic lymphadenitis, the cervix will be found swollen, tender and hot to the touch, and there will be found in the roof of the pelvis on one side of the uterus a nodulated, indurated, tender localized prominence in every respect resembling enlarged glandular structure. This indurated point goes on expanding, as it involves the surrounding tissues in the inflammatory process and œdema, until a large portion of the soft structures, cellular tissue, veins, lymphatic in the morbid process.

There is only one other form of cervicitis from which there is tendency to develope pelvic lymphadenitis and that is the specific form to be discussed in a future chapter.

I have seen numerous cases of septic cervicitis following accidental abortion sometimes with and at other times without pelvic lymphadenitis.

I have seen cases of septic inflammation of the cervix, with copious muco-purulent discharge, intense redness and congestion, complicated with pelvic lymphadenitis lasting many months before final recovery, arising probably from the fact that the lymphatics of the cervix have become diseased. In a case of septic cervicitis under my charge I could detect on one side of the uterus in the roof of the pelvis a distinctly movable indurated enlargement as large as a hazlenut, clearly indicating an enlarged gland which became a point of radiation for morbid infection of surrounding tissues followed by supperation.

Treatment.—In treating septic cervicitis the object is not only to arrest inflammatory action and engorgement, but to arrest septic infection in the centre from which it radiates and the points infected.

My custom has been after a thorough hot carbolized water douche every day to apply or insert in the vagina a tampon of glycerine and iodoform. Every third day a thorough application of the tincture of iodine is made over the cervix and entire roof of the vagina. The iodine and iodoform are rapidly absorbed by the lymphatics, and carried to the lymphatic glands throughout the

pelvis, exerting their potent disinfectant power on all the pelvic structures. After experimenting with a variety of methods I have found this the best local treatment. Where there is a septic fever, or where there is no fever present, I prescribe a pill three times a day, composed of one grain of sulphide of calcium with marked good effect, in connection with quinine and cinchonidia. In the more chronic stages, I prescribe the hundreth of a grain of biniodide of mercury, four times daily, as an alterative with satisfactory results.

The Traumatic form of Cervicitis—As the term implies this form of cervicitis originates alone from injuries sustained by the tissues of the cervix during labor, abortion or from artificial dilation by means of instruments.

Inflammation, congestion and hyperplasia of the tissues of the cervix sustained from wounds caused by labor, abortion, or artificial dilation, is one of the most frequent forms of the disease. These wounds are found in the form of the lacerated, the contused, and the form of the fissures in the mucous membrane of the cervical canal, sometimes extending from the external to the internal os, and at other times confined to the internal or external os alone, and in depth only extending down through mucous membrane. But it is essentially a wound and like fissures of the anus is obstinate and difficult to heal. Complete laceration are perceptible to the eye, and are diagnosed without difficulty. On the contrary the simple fissure in the mucous lining of the cervical canal or the contused wound are often entirely concealed within the canal and are difficult of detection. A small crack in the mucous membrane at the verge of the external os will indicate the existence of a fissure but a line in depth. Or it may exist in the cervical canal in a concealed state, or oftener than otherwise at the internal os. When, in exploring for fissure in the canal, the silver probe is passed up there will be experienced a sharp pain as the instrument passes along the line of the fissure. If it is situated alone at the internal os, as soon as the probe touches that point this sharp pain will be felt by the patient resembling the sudden touching of the nerve of a diseased tooth. In my experience these fissures in the cervical canal are among the most common causes of cervicitis in child-bearing women. They form a basis for the maintenance of inflammation that is exceedingly protracted and obstinate to

relieve because they are concealed and remain an unknown cause of disease.

Contusion of the os and cervix from the pressure exerted in protacted cases of labor constitutes another important cuuse of cervicitis. The congestion following contusion is often very great and lasting. The os is much enlarged, swollen, livid and often œdematous. Its circulation is sluggish and the vessels are partly paralyzed, and with great difficulty recover their tone. In searching for the causes of cervicitis few of us take into consideration the possibility of contused wounds of the cervix. These lacerations and fissures either heal by the first or second intention. Many cases of laceration heal by the first intention, and give no further inconvenience. The internal and concealed fissures rarely heals in this way, but may heal spontaneously by second intention. As a rule when these wounds remain open they give rise to engorgement and inflammation. I have seen cases of lacerations and fissures where the engorgement and inflammation were so excessive as to produce an amount of swelling of the os that gave to it the form and appearance of a mushroom. This expanded form of the os while the neck remains small is characteristic of this condition.

I have good reason to believe that the existence of these concealed fissures in the cervical canal often escapes observation and are the means of perpetuating for years intractable forms of cervicitis, which resisted all methods of treatment until the fissure is healed by natural or artificial means, when the local inflammation subsides.

Treatment.—In the treatment of traumatic cervicitis we must from the beginning keep in view the practical fact that we have to deal with a granulating, suppurating wound accompanied with hyperæmia, and inflammation in more or less degree. And furthermore the fact that there is a constant mutual action and reaction in progress between the morbid processes in the wound and the surrounding tissues that are calculated to perpetuate the unhealed wound and accompanying inflammation. For some years I treated all cases of traumatic cervicitis by means of the local application of nitrate of silver in solution varying in strength from ℥i to ℥ij per ounce, whether in the form of complete laceration or a mere fissure in the mucous membrane of the canal. In a very large proportion (three-fourths) I was enabled in a reasonable time not

only to subdue the inflammation and hyperæmia but to heal the wound.

The applications were made thoroughly over the external and internal cervix every third day, by means of a brush and probe wrapped with cotton. In the canal the applications were made up the entire tract of the fissure. This treatment can be very much facilitated by means of the cotton and glycerine tampon in promoting serous depletion.

I find now that I can heal these wounds and subdue the cervicitis by means of the alternate application of the tincture of iodine and glycerine tampons. But in the case of concealed fissures the iodine must be carried up the entire cervical canal. In illustration of the practical results of this method the history of two cases will be cited here.

Mrs. B., after her second labor, which was a protracted one, in twelve months was found suffering with a uterine affection that completely disabled her. On examination a quadruple laceration of the os was discovered, each laceration extending a full half inch or more. The cervix was highly congested, inflamed and enormously enlarged, presenting a mushroom appearance. From these granulating wounds poured forth an abundance of purulent discharge with occasional hæmorrhages. There was almost constant pain in the vagina and back, and the general health was seriously impaired.

Every second day for ten days the glycerine tampon was inserted, creating each time a copious flow of serum and causing effectual depletion, to the great relief of the local symptoms. Then the alternate treatment of iodine and glycerine tampons was instituted for some two weeks, and finally when the engorgement and intense inflammatory action were corrected, the lacerations were effectually healed by means of the mild solution of nitrate of silver.

Mrs. F., the mother of three children, had a protracted abortion at four months. For some twelve or fifteen months she suffered with what was supposed to be uterine disease. On examination a very greatly inflamed and highly congested cervix was found. On one side of the os could be seen a small crack, crease or fissure not more than a line in depth, extending through the mucous membrane of the cervical canal. A silver probe passed along the line of this fissure up to the internal os gave a sharp lancinating pain

the entire distance. Around this little fissure at the external os the tissues were more thickened and indurated than elsewhere. The identical treatment was applied in this as in the former case with equally permanent results.

Wounds of the cervix may exist for years without producing engorgement or inflammation in the surrounding tissue. In that case they rarely give rise to trouble in the form of pain or blenorrhœa. It is the accompanying congestion and inflammation that calls the attention of the patient to her condition.

Specific Cervicitis.—We come now to the consideration of the specific form of cervicitis. I am satisfied that there is a very considerable proportion of the cases of cervicitis that come under our observation arise from specific causes; these cases which often have had a protracted existence, and the cause of these may be unsuspected and unknown to us at the time. These cases are due either to gonorrhœa or syphilis. I have found both among the unchaste and chaste married females.

Gonorrhœal Cervicitis.—The inflammation of the cervical tissues in this form of disease is exceedingly acute and violent. It not only involves the mucous surface of the cervix and vagina, but involves the submucous and often the interstitial tissues, also causing violent congestion and œdema. The organ is intensely inflamed, congested and red, and the entire mucous surface of the cervix and os pours fourth pus abundantly. This constitutes a differential diagnosis from the ordinary forms of cervicitis. In all other forms the secretion of pus comes from the cervical canal and os. Diffused suppuration over the entire external surface of the cervix denotes gonorrhœal infection.

The acute attack is almost certain to leave behind a chronic form of cervical hyperæmia and inflammation that is exceedingly unmanageable. The infection from this chronic form is very liable to attack neighboring structures, as the lymphatic system of the pelvis. On one occasion I saw a well-marked case of infection of the lymphatic glands of the pelvis from gonorrhœal cervicitis that had lingered for months. The cervix in the acute stage was intensely inflamed and engorged. After the acute symptoms subsided there remained an enlarged and inflamed cervix, with continuous purulent discharge. Then on one side of the uterus in the roof of the vagina there appeared a hard, nodulated, movable

prominence which was evidently an enlarged gland. This continued to increase and extend until a large portion of the surrounding tissues became involved. Then septic fever was developed, then abscess. Here was manifestly a case of gonorrhœal pelvic lymphadenitis. Old cases of cercivitis from gonorrhœal infection are exceedingly intractable and continue to be centres of infection.

I have met with this form of disease in chaste married women, contracted from unfaithful husbands, with the symptoms of intractable cercivitis which had infected the neighboring lymphatic glands of the pelvis and their surrounding tissues, producing an extensive mass of diseased structures that dated back to gonorrhœal infection fifteen years previous.

Treatment.—Douches containing the peroxide of hydrogen and bichloride of mercury in appropriate proportions effect good results throughout the treatment. We must remember the fact that we are dealing with a disease, the infective proportions of which may continue indefinitely. The iodoform and glycerine tampon inserted every second day, and permitted to remain twenty-four hours, is a valuable local remedy. Then the alternate application of a solution of nitrate of silver ʒss to ʒi over the entire cervix and vagina will do much to correct infection and inflammation.

Syphilitic Cervicitis.—This form of cervicitis is attended with a peculiar form of inflammation and hyperplasia, and as its name implies arises from syphilitic infection, either primary or secondary.

In the cases of cervicitis seen by me, there was a remarkable paucity of secretion of any kind. In the primary form, after healing of the chancre on the cervix, there remains an inflamed congested engorged cervix, with no catarrhal secretion, or, on the contrary, secondary syphilis may attack the cervix, causing a protracted cervicitis, accompanied with a sub-acute form of inflammation and hyperplasia that continues until the syphilitic disease is cured.

As a means of differentiation of the syphilitic from other forms of the disease, the fact may be stated here that no logical or general non-specific methods will cure it. They make no impression on the inflammation or engorgement, and it is immaterial how assiduously they may be applied without the co-operation of mercury or the iodides. As soon as the system begins to feel the influence of

these, the cervicitis begins to break down, and all consecutive symptoms subside.

In syphilitic cervicitis the tissues of the cervix are peculiarly hard, indurated injected, dark-red in color, with erosions on the os, having well defined edges that might easily be mistaken for harmless non-infectious abrasions. These erosions are liable to heal and return, again and again, without apparent cause. The history of the following cases will serve to illustrate the peculiar characteristics of the disease:

Mrs. I., a young married woman, contracted syphilis from her husband soon after marriage. There were two well marked chancres on the labia. She was treated for this by the usual method, and the chancres healed with no apparent evil result. In the next of two years she had two abortions a dead fœtus in both instances, evidently from syphilitic causes. Twelve months subsequent to the last abortion, she came under my care with uterine disease. I found the entire cervix swollen, very hard, deep dark-red in color, giving vent on the slightest irritation to a copious flow of blood; indeed, the menorrhagia from which she suffered was her chief source of annoyance. There were two slight erosions on the os with somewhat well-defined edges. On each side of the uterus in the roof of the vagina, there were enlarged lymphatic glands, distinct, movable, round in form, well defined and tender on pressure. These enlargements could not be mistaken for any other strictures than glandular. The appearance of the patient was decidedly cachetic, and but for my previous knowledge of the syphilitic taint of her constitution, and the test of treatment, I should have regarded the case as one of intractable cervicitis. She was treated at first for one month by means of iodine and glycerine tampons without the least improvement. Suspecting then that syphilis was the true cause of the cervicitis and disease of the pelvic glands, the patient was placed on a thorough anti-syphilitic course of treatment with the most satisfactory results. The cervical engorgement, hyperplasia and inflamation disappeared and the erosion healed and the pelvic lymphadenitis subsided, and the woman recovered robust health. Here was clearly a case of syphilitic cervicitis and pelvic lymphadenitis, as a feature and part of constitutional infection in the secondary stage. I should mention also that the menorrhagic symptoms disappeared, and in twelve months

the patient gave birth to a healthy child. It will not be out of place here to suggest the propriety when treating obstinate and intractable cases of cervicitis to investigate more closely the nature of the case, to ascetain if there are any enlarged pelvic glands, any erosions on the os, however slight, or any constitutional signs of syphilis, and, in addition, if any suspicious circumstances exist, to bring the patient to the test of treatment. My own experience proves to me that there is syphilitic cervicitis, and that we do meet with it in practice. Three cases of genuine syphilitic cervicitis have up to this time come under my observation.

The second case was that of a young girl of 18 years. In this case I found a primary chancre situated on the cervix near the os uteri, which had been in existence for some time previous, as there was in each groin a well-defined bubo. The patient was placed on an anti-syphilitic course of treatment, but it was very irregularly and impefectly carried out, and secondary symptoms developed. The primary chancre healed, but there was left a cervicitis, attended with a highly engorged, inflamed and indurated tissue that was exceedingly intractable, and did not subside until complete eradication of the syphilitic taint was accomplished.

The third case that came under my care was in a woman of the town who had long been the subject of syphilis. The cervix was very dense and hard, of dark-red complexion, tender to the touch, and highly congested and inflamed. Local remedies exerted no beneficial influence whatever in this case, but complete resolution was finally effected by a long and rigid course of anti-syphilitic treatment, and in addition by iodoform glycerine tampons.

Silver Nitrate in Cholera.

Dr. Odartchenko gets very good results ("Med. Week") from silver nitrate in cases of cholera. He gives it in doses of from one-thirtieth to one-tenth of a grain several times a day in distilled water. He begins with a large dose, which is gradually lessened as the condition of the patient improves. When the diarrhœa is very violent, he recommends the use of enemata of two and one-half pints of boiled water containing one grain of silver nitrate. Under this treatment vomiting stops after the second or third dose of nitrate ; the other symptoms gradually subside and recovery follows in three-fourths of the cases—a very low mortality for cholera.

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Containing the Essential Elements of the Animal Organization—Potash and Lime;

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The Tonics—Quinine and Strychnine;

And the Vitalizing Constituent—Phosphorus; the whole combined in the form of a Syrup with a **Slightly Alkaline Reaction.**

It Differs in its Effects from all Analagous Preparations; and it possesses the important properties of being pleasant to the taste, easily borne by the stomach, and harmless under prolonged use.

It has Gained a Wide Reputation, particularly in the treatment of Pulmonary Tuberculosis, Chronic Bronchitis, and other affections of the respiratory organs. It has also been employed with much success in various nervous and debilitating diseases.

Its Curative Power is largely attributable to its stimulant, tonic, and nutritive properties, by means of which the energy of the system is recruited.

Its Action is Prompt: it stimulates the appetite and the digestion, it promotes assimilation, and it enters directly into the circulation with the food products.

The prescribed dose produces a feeling of buoyancy, and removes depression and melancholy; *hence the preparation is of great value in the treatment of mental and nervous affections.* From the fact, also, that it exerts a double tonic influence, and produces a healthy flow of the secretions, its use is indicated in a wide range of diseases.

NOTICE--CAUTION.

The success of Fellow's Sprup of Hypophosphites has tempted certain persons to offer imitations of it for sale. Mr. Fellows, who has examined samples of these, **finds that no two of them are identical,** and that all of them differ from the original in composition, in freedom from acid reaction, in susceptibility to the effects of oxygen when exposed to light or heat, **in the property of retaining the strychnine in solution,** and in the medicinal effects.

As these cheap and inefficient substitutes are frequently dispensed instead of the genuine preparation, physicians are earnestly requested, when prescribing the Syrup, to write "Syr. Hypophos. **Fellows.**"

As a further precaution, it is advisable that the Syrup should be ordered in the original bottles; the distinguishing marks which the bottles (and the wrappers surrounding them) can then be examined, and the genuineness—or otherwise—of the contents thereby proved.

Medical Letters may be addressed to

Mr. FELLOWS, 48 Vesey Street, New York.

Charlotte Medical Journal.

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Editors and Publishers,

No. 36 South Tryon Street, Charlotte, N. C.

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Articles intended for the Original Department of the Charlotte Medical Journal will be accepted only with the understanding that they are contributed to it exclusively.

WE received a few days ago a paper written by Dr. S. L. Montgomery, a prominent physician of Concord. It came too late for the March issue, but we will give our readers the benefit of it in the April issue. Good things will keep.

ONE hundred and twenty-five thousand dollars was recently donated to the Medical Department of the Western Reserve University by Mr. Woods. This is a generous donation and we congratulate the recipients of this benefaction.

THE SAME REQUEST.

HOW often the editors of this journal, as well as those of other journals, request and ask the different physicians of city and country to report any of their cases that are of interest and not of every day occurrence; any operation successfully performed; any treatment, specially new, that proved satisfactory. The medical journals of this country could reach a higher degree of usefulness if only the physicians would co-operate and express their different ideas and views pertaining to the various incidents that occur in their practice. I was talking recently with one of the leading physicians of a town near here, and I asked him if, in his extensive practice, he ever had to combat with strange and peculiar diseases, or anything that he ever thought was new or would be of interest to the profession, and if so, why had he not reported them. He said he could not write. I asked him if he had ever attempted to write anything for any medical journal. "No" was his answer. This is the case with nearly all of our physicians—they say they "can't," when in fact they have never tried. 'Tis true 'tis some

trouble to carefully report a rare and interesting case, but is anything ever obtained without some trouble, some inconvenience? Suppose Alexander had never given his operation to the profession, or Sims his speculum, there would have been no Sims or Alexander. So with any physician; if they would only express their ideas, put into operation what they know, there probably would be more Simses and Alexanders.

The case we give below was, in a casual manner, given to me during a conversation recently held with him.

"Was called to Mrs. A. in her second confinement. Labor terminated in six hours. On removing the placenta I felt something enveloped within, as though a hand might be encased there. On close examination I found entirely enclosed within the placenta a second fœtus with cord and its own placenta, which was perfectly round and exceedingly hard. The head of second fœtus was as flat as a silver dollar, with every feature prominent, even the sex, that of a male child. Not an unpleasant symptom followed the labor. Had puerperal fever set in I should not have been surprised."

This is a very interesting piece of news, and if I had not accidentally drawn the Doctor out it would have silently been kept from the press. We beg our physicians to give us the news.

A NEW MEDICAL JOURNAL.

THE first number of the New York Polyclinic has reached our table. There are few journals which have a neater appearance or contains better selected advertisements. The Professors of the Polyclinic constitute its corpse of editors, and with such men at the head it will be one of the ablest and best of journals.

EDITORIAL BRIEFS.

Doctors of Dentistry in Germany are not allowed to use the title doctor.

We are glad to note the complete restoration to health of Dr. Robert Barthlow, and his resumption of practice in Philadelphia.

The February issue of the University Medical Magazine gives an interesting article on the life of Dr. Agnew—giving illustrations of his clinics in '86 and '88.

The tinc. of the oil of cinnamon is a specific for post-partem hemorrhage. Give from twenty to sixty drops as often as necessary to control the hemorrhage.

The following officers were elected at the last meeting of the Alamance Medical Society: President—Dr. R. A. Freeman; Vice-President—Dr. W. G. Stafford; Secretary and Treasurer—Dr. W. E. Fitch. This society is in good working order.

Books Reviewed.

FERMENTATION, INFECTION AND IMMUNITY: A new theory of these processes, by J. W. McLAUGHLIN, M. D., Austin, Texas.

This book contains 240 pages, and scarcely could so much useful information be placed in so short a space. The subject matter treated here is entirely new and is well worth the attention of physicians: especially so is it now, when the cholera is on the verge of entering our country. The book is printed on good paper with clear, readable type. We hope it will find ready sale among our readers.

STORIES OF A COUNTRY DOCTOR. By WILLIS P. KING, M. D.

Everything about this book is amusing, even the preface and title. When a physician becomes tired of the turmoils and difficulties of his profession and wishes a rest and a good laugh, only let him pick up this book. Not only is the work amusing, but it is filled with many incidents that carry you back to a reality of your own. This book is published by Hummel & Parmele, and will be sent to any physician on receipt of $1.

INTERNATIONAL CLINICS: A Quarterly of Clinical Lectures on Medicine, Neurology, Pediatrils, Surgery, Genito-Urinary Surgery, Gynæcology, Ophthalmology, Laryngology, Otology, and Dermatology. By Professors and Lecturers in the Leading Medical Colleges of the United States, Great Britain and Canada. Edited by JOHN M. KEATING M. D., JUDSON DOLAND, M. D, J. MITCHELL BRUCE, M. D., F.R.C.P., and DAVID W. FINLAY, M. D., F R. C. P. Second Series, 1882. Vol. I, 8vo., pp. 363; Vol. II, 8vo., pp. 373; Vol. III, 8vo., pp. 393. Philadelphia: J. B. LIPPINCOTT & Co., 1892.

We have received the first three volumes of the Second Series of the International Clinics. Three more valuable books could scarcely be given to the profession. The first volume contains thirty-eight clinical lectures by some of the ablest specialists in the world. The second and third volume contains each fifty lectures. The second volume has a biographical sketch written by

Dr. Ashurst, of that most renowned and wide world-known surgeon and teacher, Dr. Agnew. The life of Agnew, no doubt, will be written and re-written by different men, but the one alluded to in second volume is well written and will add greatly to its usefulness and sale.

The subjects considered in these chapters embraces the entire domain of medicine and surgery. Each sentence is finished off in a rounded and smooth manner not usually characteristic of clinical lectures.

Each chapter is treated from an original, practical and scientific standpoint, making the work thoroughly adaptable to the exigences of the members of the medical profession. Great praise should be given the publishers of this most excellent work, and it is most creditable to the medical profession that it is meeting with such success.

Good Cause for Suicide

William Harman, a resident Titusville, Pa., committed suicide a few days ago from a melancholy conviction that he was his own grandfather. Here is a singular letter that he left: "I married a widow who had a grown-up daughter. My father visited our house very often, fell in love with my step daugter and married her. So my father became my son-in-law and my step daughter my mother, because she was my father's wife. Some time afterwards my wife had a son; he was my father's brother-in-law and uncle, for he was the brother of my mother. My father's wife—i. e., my stepdaughter—had also a son; he was, of course, my brother, and in the meantime my grandchild, for he was the son of my daughter. My wife was my grandmother, because she was my mother's mother. I was my wife's husband and grandchild at the same time. And as the husband of a person's gandmother is his grandfather, I was my own grandfather."—*Ex.*

SUTURE of the lung has been carried out by Dr. Guermonprez in a man of eighteen, whose pleura had been opened for a pyoneumothorax, and had been followed by a persistent bronchopleural fistula. Portions of six ribs were removed and the orifice of the fistula was satured with catgut. The patient made a slow recovery, but was finally able to resume work.—*Med. Record.*

Selections.

Cholera Cures.

PROPHYLACTIC.—℞ Magnesia sulphat. ʒij; Acid sulfurosi; Aquæ, aa ʒ vxj; Tinct. capsic, ʒ iv.

M. Sig. Teaspoonful night and morning.—*Bevan.*

THERAPEUTIC.—℞ Acid. sulfurosi; Aquæ, aa ʒ xvj; Tinct. capsic, ʒ iv; Morphiæ sulphat. gr. ij.

M. Sig. Teaspoonful every half hour until relieved.—*Bevan.*

℞ Tinct. opii; Tinct. capsici; Tinct. rhei aromat.; Spts. menthæ pip.; Spts. camphoræ, aa p.æq.

M. Sig. Twenty to forty minims, diluted.—*Ruchenberger.*

℞ Tinct. opii; Tinct. capsici, Spts. Camphoræ, aa ℥ j; Chloroformi, ʒ iij; Alcoholis, q. s. ad ℥ v.

M. Sig. Twenty to forty minims, diluted.—*Squibbs.*

THREATENED COLLAPSE.—℞ Strichniæ sulphatis, gr. 1-4; Acid sulphuric, dil. ʒ ss; Morphiæ sulphatis, gr. ij.

Aquæ camphor, ʒ iiiss.

M. Sig. A teaspoonful every hour or two, well diluted.

COLLAPSE.—℞ Morphiæ sulphat, gr. x; Atropiæ sulphat, gr. j; Aquæ destillat. ʒ x.

M. Sig. Five to ten minims hypodermically, as required.—*Nakamura.*

RICE WATER DISCHARGES, CRAMPS AND SHRINKAGE OF EXTREMITIES.—℞ Acid Sulphuric dil, ʒ ss; Eorphiæ sulphat, gr. 1-3; Spts. vini gallici, ʒ iss; Aquæ distillat, ℥ iij.

M. Sig. Inject under the skin of the arms, legs, and over the stomach every hour until the symptoms are relieved.—*Mitchell.*

℞ Acidi nitrosi, ʒ j; Tinct. opii, gtt. 40; Aquæ camphor, ℥ viij.

M. Sig. One-fourth to be taken every three or four hours.—*Hope.*

EARLY STAGES.—℞ Acidi phosphorici dil. ℥ j.

Sig. A half fluid drachm in water.—*Sedwick.*

℞ Tinct. opii, *m* x-xv; Chloroformi, *m* xv-xx; Spts. vini. ʒ j; Aquæ destillat, ℥ j.

M. Sig. Take at a dose.—*Lowndes.*

℞ Chloroformi. *m* vj; Aquæ destillat, ℥ j.

M. Ft. naustus. Sig. To be given after five grains of calo-

mel and two grains of opium, and to be repeated if necessary.—*Oates.*

INITIAL STAGE.—℞ Morphiæ sulphat, gr. ij; Spts. camphoræ, ℥j.

M. Sig. Fifteen minims every three or four hours by mouth, or hyperdermically, in severe cases.—*Nakamura, Med. Review.*

GENERAL DISINFECTION.—℞ Hydrarg. biniod. rubri; Potass. iodid, aa gr. xv; Aq. destil, O ij.

M. Sig. For disinfection.

This 1-000 solution does not form, like that of corrosive sublimate, an insoluble compound with the albumenoid tissues and fluids of the human body, and is greatly used in preference. It is a powerful antiseptic.—*Amer. Doctor.*

A Shrewd Servant.

An exchange prints the following: An incident which happened a few days ago in this city shows the servant girls are about as sharp as the average run of people. Mrs.—is a married woman who is evidently unable to keep a servant girl more than six weeks. She is overbearing and tyrannical, and makes it intensely hot for the domestic. A few days ago, so the neighbors say, her servant came in and said, as her month was up, she would take her money and go. "My gracious, Maggie, you must stay a few weeks longer. You know that I expect to be sick soon. I will give you ten dollars more a month." "I can't stay ma'am. I have engaged another place." So the hard-hearted Maggie packed her trunk, and an hour later, as she was leaving, she said: "If you please ma'am, I hope the boy will be a fine one." "Why are you so positive about it being a boy?" "Wy sure ma'am, no girl would stay with you *nine months.*"

The graduate of a Michigan educational establishment, and a practitioner of medicine, was called upon to certify to the insanity of one of his patients. His certificate alleges that his patient "Imagines he ones the welth of the State of Michigan and is vry Troubl Some with his neighbors emagenin them to do hime & his family harm keeping them in terror all the time with wakefulnes all night keeping all the family from rest & all comforts of home." Surely the physician must have some paragraphic lesion himself, casting doubt on his sanity as a practitioner.—*Review.*

Successful Cases Best Treated by Successful Remedies.

BY H. G. BLAINE, A. M., M. D., PROFESSOR OF DISEASES OF THE NERVOUS SYSTEM, TOLEDO MEDICAL COLLEGE.

Modern books have in a measure omitted from the classification of drugs a class which formerly went by the name of alteratives, and which were of so much importance that a physician who has been in practice a number of years can not resist the temptation to yet speak of remedies having such action as being actually aleratives. These are vegetable and mineral. The former particularly have always been in great demand in a number of cases where the natural tendency of the disease is to produc wasting and debility. Scrofula, a term by which we formerly meant a tubercular affection other than of the lungs, and at present a tubercular disease of the glands, bones and joints, is one of the diseases in which this class of remedies is decidedly applicable. In the post-tertiary stage of syphilis they also frequently act so nicely that we must continue to give them the preference over minerals. Recently there came to our notice a combination of such vegetable alteratives, sold under the name, Verrhus Clemiana, and consisting of the fluid extracts of Clematis Erecta, Prinos Verttcillatus, Fraxinus Americana and Rhus Glabrum, with one-eighth of one per cent. of Venanatic Acid, which has given such uniformly satisfactory results in these cases that we are tempted to recommend it as an alterative par excellence. It seems to possess the peculiar property of repairing wasted disorganized tissues to a greater extent than any other preparation we have'yet tried. The following are a few cases in which the preparation has given good results in my practice:

Chas. G., an Arabian, aged 36. Diagnosis, syphilis. Was under treatment at different places in this country. Came to me for treatment with secondary symptoms of the disease. Mercury did not seem to be borne well, and as it was the time I first began using Verrhus Clemiana I ordered a bottle with directions to take a teaspoonful every four hours. Improvement was soon noticed. He continued to take the preparation until about one month ago, when he sailed for his native country with a bottle of Verrhns Clemiana and in excellent health and spirits.

Mr. P.—Strumous diathesis. Contracted gonorrhea about one

and one-half years ago. After the usual treatment the discharge lessened but would not cease entirely. In spite of all local treatment a gleety discharge continued. Finally I concluded to give him constitutional treatment with a view of correcting the tendency to struma, when, without any further local treatment, the discharge stopped. For the purpose of remedying the constitutional taint I ordered Verrhus Clemiana. I do not pretend to say that it is an infallible remedy for gleet, but in those cases in which the system is run down, or where there is a constitutional diathesis, I believe the cure will be greatly facilitated by giving this preparation.

Lillie B., aged 5, came under my care one year ago. No history of phthisis in the family. She had measles when two years of age and has continued weak ever since, and of late has developed scrofulous aspect. From time to time eruptions made their appearance about the head and neck, and slightly on the trunk and lower extremities. They were at first pale, but gradually became red, and consisted of flattened elevations from about one-sixth to a fourth of an inch in diameter that were surmounted by a scab. In the early part of the year these spots took on inflammatory action and began to suppurate to the great annoyance of the patient. The patient began to grow weaker and weaker. This case I think must be looked upon as essentially scrofulous. The treatmeut which I adopted consisted of a liberal diet and Verrhus Clemiana. My patient improved rapidly under this treatment, and to-day there is no visible taint of any scrofulous affection. I look upon the above remedy as having effected a complete cure in this case after all other remedies had been tried without effect.

Eating Before Sleeping.

A recent writer says that the view that brain workers should go supperless to bed is not good advice. Most medical authorities of the day think it wrong. It is a fruitful source of insomnia and neurasthenia. The brain becomes exhausted by its evening work, and demands rest and refreshment of its wasted tissues, not by indigestible salads and "fried abominations," but by some nutritious, easily-digested and assimilated articles. A bowl of stale bread and milk, of rice, or some other farinaceous food, with milk or hot soup, would be more to the purpose. Any of these would insure a sound night's sleep, from which the man would awaken refreshed.—*Ex*

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NOTE.—Avoid substitutes—in shape of the commercial article bottled—unfit, unsafe and worthless to use as a medicine.

Ch. Marchand's Peroxide of Hydrogen (Medicinal) is sold only in 4-oz., 8-oz., and 16-oz. bottles, bearing a blue label, white letters, red and gold border, with his signature. Never sold in bulk.

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Chemist and Graduate of the "Ecole Centrale des Arts et Manufactures de Paris (France).

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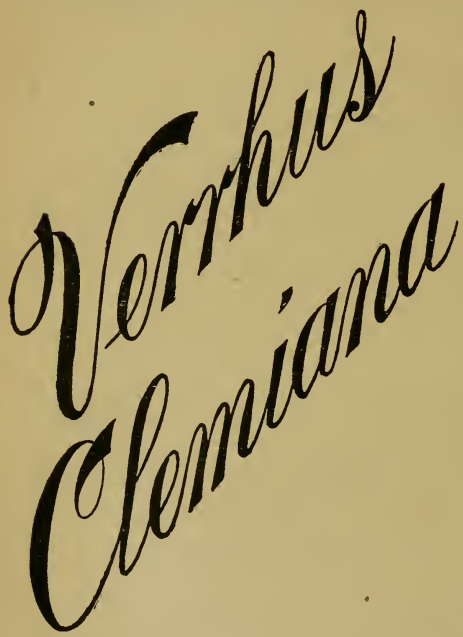
A Voice from the South.

THAT a greater variety of valuable MEDICINAL PLANTS are found in the SOUTHERN STATES than in any other section of this country, is a fact known to all physicians who have taken the pains to investigate the sources of our drug supplies. In fact, the South will hold her own, in this respect, with any other section of equal area in the world. She furnishes the principal laboratories of our own country with the bulk of their crude drugs, and even foreign manufacturers draw largely on her fields and forests for supplies of many valuable medicinal agents not found elsewhere. It is, therefore, not surprising that the discovery of a remedy that promises to revolutionize the treatment of Chronic or Constitutional Diseases (such as Syphilis, Scrofula, Rheumatism, Eczema, etc., etc,,) is announced from that quarter. The story of this discovery is charmingly told in a little book (for physicians only) entitled:



"A Voice from the South,"

which will be mailed free to any physician sending address to

The Clemiana Chemical Company,

ATLANTA, GA.

Effects of Food on Character.

A brutal and blood-thirsty race is produced as natural as the streams flow to the ocean, by a wandering, sporting life, living on the animals thus killed. We need no better illustration of this than is furnished by the North American Indian, whose time is spent, mainly, in hunting, fishing and war! This character was produced, in part, by the influence of cruelty in killing game, with the imbruting tendency of the use of brute flesh, the eater partaking of the nature of the beasts eaten. (To become hoggish eat hog!) The same is true, more or less, of the pagan tribes of the world. It is on the same principle, that in feeding the innocent and harmless lamb on meat, made him ferocious like the tiger—completely changing his nature. It should be remembered also, that the Indian as naturally drank intoxicants as he breathed.

On the contrary, the rice-eating Chinese are industrious, kind-hearted, peaceable, by no means inclined to war and murder. (Aside from their dietetic habits, our country would not dare to abuse these teeming millions, who aside from their peaceable disposition, might overrun and devaste all Europe.) The same applies with similar force to the Japanese and the people of the Carolina Islands, and, indeed, to all nations in which meats are eaten sparingly or not at all. As a general principle we may judge of the different members of the family by the amount of meat eaten, particularly of pork, grease and the exciting condiments, by the outcropping of sensuality, greed, a domineering spirit, rapacity, abnormal appetites, attended by a desire for intoxicants and tobacco, the absence of real intellectuality, delicacy, refinement, sympathy, and a peaceable spirit.—*Ex.*

The Post-Graduate hits the nail square on the head with a telling blow when commenting on the editorials of a Philadelphia medical journal urging a revision of our code of ethics, says: "Dear neighbor, codes need not trouble you. What Pennsylvania needs is a good law creating a board of medical examiners. Improve the quality of physicians. Make them all pass an honest State examination, homœpaths and regulars alike, and codes will be unnecessary. A little more knowledge and a little less, not of ethics, but of talk about ethics, is what the profession of this country needs."

Rules for Good Health.

1. Be regular in your habits.
2. If possible go to bed at the same hour every night.
3. Rise in the morning soon after you are awake.
4. A sponge bath of cold or tepid water should be followed by friction with towel or hand.
5. Eat plain food.
6. Begin your morning meal with fruit.
7. Don't go to work immediately after eating.
8. Be moderate in the use of liquids at all seasons.
9. It is safe to filter and boil drinking water.
10. Exercise in the open air whenever the weather permits.
11. In malarious districts do your walking in the middle of the day.
12. Keep the feet comfortable and well protected.
13. Wear woolen clothing the year round.
14. See that your sleeping rooms and living rooms are well ventilated, and that sewer gas does not enter them.
15. Brush your teeth at least twice a day, night and morning.
16. Don't worry; it interferes with the healthful action of the stomach.
17. You must have interesting occupation in vigorous old age. Continue to keep the brain active. Rest means rust.—*Herald of Life.*

CATALGINE CHEMICAL CO., LEBANON, Mo.

Gents:—The results from the use of Catalgine in acute rheumatism, neuralgia, and severe headaches, as prescribed by me are entirely satisfactory, and a trial by the profession is recommended as you will reap results to the satisfaction of your patients and yourself. Very truly, Dr. O. E. MATHIS,
12th and Main St. Kansas City, Mo.

Doctor you can add much to your comfort by investing $10 in two Reefy Driving Lamps. This lamp can be adjusted to any kind of vehicle. It is carried on an Automatic Bracket. Its oscillation prevents the jar of the vehicle from extinguishing the flame. Let me send you illustrated circulars free.

S. L. REEFY, M. D., Edinburgh, Ill.

Immortal Infancy.

Whittier says: "From the Infinite Heart a sacred presence has gone forth and filled the earth with the sweetness of immortal infancy. Not once in history alone, but every day and always, Christ sets the little child in the midst of us, as the truest reminder of himself, teaching us the secret of happiness, and leading us into the kingdom by the way of humility and tenderness."—*Ex.*

The Hygienic Significance of a "White Christmas."

We are all familiar with the old saying, of English origin doubtless, that "a green Christmas makes a full churchyard." The underlying significance of this proverb is far more evident to the dwellers of the British isles than in our own part of the temperate zone. There, in England especially, the absence of snow during December is commonly coincident with fog and haze and scarcity of sunshine—depressing conditions; while a fall of snow tends to clear the atmosphere and supply a crisp and invigorating aerial condition. Here, in our Middle States, we have reason to dread the extremes of cold that are often precipitated upon us with a December snowstorm. To us it often means a high mortality by pneumonia. Commenting upon the snowfall of a fortnight ago, an editorial writer in the *New York Herald* thus remarks concerning "the treasures of the snow," of which Job spoke: "These treasures are manifold, but none of its charms is greater than its light-reflecting quality, by which it brightens and cheers the gloom of the solsticial period of winter in all the bleak, high latitudes of the globe." Therefore it is a hopeful sign, this ante-Christmas blanket of white, and all persons who are imbued with the spirit of the old adage may confidently regard the snowfall of December as the harbinger of the proverbially happy and healthy "white Christmas." Adopting this explanation, we percieve that it is our nervous apparatus that is benefitted by this climatic condition, which impresses us in a peculiarly grateful way after a spell of murky or foggy weather. It is hopeful, also, for it ekes out the daylight and assists the belated traveler along roads that are overshadowed by woods. A December snowfall is as benign, therefore, as it is beautifying, during these days of the minimum of sunshine. "During these dark days of the winter solistice," adds the

same writer, "the glitter of the snow most happily compensates for the paucity of sunlight, and the more strikingly is this point realized when, as was the fact last week, the trees and all exposed surfaces were coated with the glazed frost, or rine, or *verglas* as the French call it." Respecting the cleansing influence of snow over a foggy and dust-laden condition of the atmosphere, sanitary writers are of one mind, that it is second only to a vigorous rain fall in rendering the air more respirable, because cleaner and more amply ozonized.—*N. Y. Med. Journal.*

Impotence, Cystitis, Gonorrhœa, Enlarged Prostate, Chronic Inflammation of the Stomach.

I have much pleasure in adding my testimony to the value of *Sanmetto.* It is a potent remedy for the diseases of the urinary organs. I have prescribed it in impotence, cystitis, gonorrhœa, enlarged prostate and also in chronic inflammation of the stomach, with wonderful success. I am prescribing it every day. Cannot do without it in my practice.

Bumpus Mills, Tenn. J. W. SHEMWELL, M. D.

In diphtheria the use of Pepsin as a solvent of the false membrane is by many physicians highly recommended. Here, as indeed wherever Pepsin is indicated, purity and digestive power are of the utmost importance. It therefore follows that a pepsin, free from septic contamination, that is perfectly soluble and of a high digestive standard, is to be preferred for this purpose, and the fact that one of the greatest living authorities on diseases of the throat endorses Webber-Pepsin S. & D. in diphtheria, will go far toward establishing the supremacy of this product.

Dr. Carl Seiler says: Owing to the perfect solubility and superior digestive power of Webber-Pepsin, S. & D., this brand is the best adapted for preparing an efficient digestive fluid for use in the treatment of Diphtheria wherever it is desirable to remove the false membrane through the agency of Pepsin.

Inasmuch as this ferment is capable of doing its best work in the presence of 0.2 per cent. Hydrochloric Acid, a satisfactory vehicle may be prepared by dissolving 11 minims of Hydrochloric Acid C. P. in 4 fluid ounces of water.

C. SEILER, M. D.

Philadelphia, January 19, 1893.

Abstracts.

A Case of Labial Chancre From a Cigar.

BY ROBERT C. KIRKPATRICK, M. D., MONTREAL, CANADA, ASSISTANT SURGEON, MONTREAL GENERAL HOSPITAL.

Dr. W. S. Gottheil, in a letter to the *New York Medical Journal*, published on March 19, 1892, points out the danger of syphilis being communicated by cigars. He gives the history of two cases of secondary syphilis, one whom was suffering from a chancre on the lip which she had acquired by drinking out of the cup used by the other, who had numerous mucous patches in the mouth. The girls were cigar finishers, and took the cigars from a machine, biting off the ends and using their saliva for finishing the tips. Neither of them would believe that the disease was contagious, and both continued to work as before, "because it took too long to use the knife and brush."

These are by no means isolated cases, and that the danger is not imaginary is shown by the following history:

"J. W., aged forty-one, hotel clerk, presented himself at the Montreal General Hospital on May 27, 1892, complaining of a sore on the left side of his lower lip, which sore had been there for two months. The free edge of the lip showed an ulcerated surface about an inch in length by a quarter of an inch in breadth, and quite superficial. The lip was very much infiltrated about the ulcer, and was very hard to the touch, the swelling being about the size of a walnut. There was no rash over the body, and here were no mucous patches about the mouth. One small gland, could be felt under the chin.

"He was put upon mercurial treatment at once, and in about three months the ulcer had healed and all infiltration disappeared. About a month after commencing treatment a single pigmented spot, of about the size of a pea, appeared on the forehead, and disappeared about the same time as the ulcer."

"The patient is a married man, but his wife is not at present in the city. He positively denies any venereal cause for the disease. He does not smoke a pipe, but does smoke cigars. A few weeks before the sore appeared on the lip some cigarmakers were living at the hotel where he was clerk. These men frequently gave him cigars, and he afterward found out that two of the number were

suffering from syphilis. This, coupled with the fact that the sore appeared on the side of the mouth on which he habitually held the cigar, makes it more probable that he—contracted the chancre—for such the sore undoubtedly was—from the cigarmakers through the medium of the cigar.—*N. Y. Med. Journal.*

Unaccountable Drowning.

We find in the *Northwestern Lancet* a more reasonable explanation, supported by facts, of the sudden drowning of good swimmers, hitherto attributed to cramp. There is nothing in a cramp in a leg to prevent an ordinary swimmer supporting himself in the water by his hands, or on his back, nor to cause him to throw up his hands and sink once for all like a stone. The cause is attributed to perforation of the ear drum, through which the access of water pressure occasions vertigo and unconsciousness: and a practical caution results, to the person having such perforations to protect their ears with a stopper of cotton when bathing.—*Cleveland Med. Gazette.*

AUDUBON, K. Y. FEB. 6, 1893.

WESTERN CHEMICAL CO., CLARKSBURG, MO.

I rceived the sample bottle of your AN-TA-PA-NA some weeks since, for which accept my thanks. I have used it in Neuralgia, Megrim, Nervous Cough, and in miscellaneous Headaches, without a failure. As an Antipyretic it is superior to Phenacetine and Antikamnia, and fully equals them as an Analgesic. It induces a gentle perspiration, and quiets nervousness, and promotes natural sleep. It never offends the stomach, and acts safely and pleasantly with little children and women, as well as with robust men. It produces no ill effects even in 10 to 15 Gr. doses, in adults. My average dose XMM is however about 5 to 7½ Grs. The test is not disagreeable, if given in a little syrup.

Yours truly &c., SAMUEL C. SMITH, M. D.

A Royal Heart for Sale.

The heart of the French Dauphin, son of Louis XVI. and Marie Antoinette, was removed at the autopsy ninety-seven year ago, and has been preserved in alcohol ever since. The heart was in the possession of Dr. Pelletan who performed the autopsy. His son having recently died, the specimen is to be sold at auction.

Every Physician in the World Should Read this Advertisement.

The Rip Van Winkle Reclining Rocker!

OFFICE AND GYNÆCOLOGICAL CHAIR COMBINED.

Special Inducements given to Physicians for a Limited Time. WRITE AT ONCE.

No. 1.

This is the most complete Physician's Chair ever offered to the profession. It combines a handsome leather-covered Office Chair and a first-class Gynæcological Chair, at less than one-half the price you would have to pay for any other first-class gynæcological chair alone.

The chair is first-class in every respect and fully warranted. It has over two hundred changes of position; it is noiseless in all its movements; the back can be lowered or seat tilted at any angle desired, with full weight of patient thereon, with the utmost ease.

No. 2.

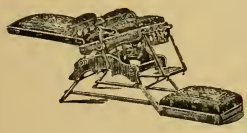
As a Gynæcological Chair it will take any position shown, or any intermediate position, besides having newly-patented improvements, which make it without doubt the best and cheapest Office and Gynæcological Chair in the World.

This chair can be converted from a splendid office chair (see cuts Nos 1 and 3) into one of the most complete Gynæcological chairs in one-half minute (see cuts Nos 2, 4 and 5).

No. 3.

This chair is sold with or without the Gynæcological attachment, as desired. It is unquestionably the most complete and comfortable reclining or lounging chair ever made. We make a special price to physicians, and also give them a handsome commission on all orders we receive thr ugh them for chairs for their patients. No chair in the world is so well adapted to ladies suffering from female weakness, and the commission we give on your orders will soon pay for your own chair.

SEND 2c. STAMP FOR SIX ELEGANT COLORED ENGRAVINGS.



No. 4.

Showing the chair in different positions and different styles of upholstering, etc.; also circulars containing splendid testimonials from nearly every State and Territory in the U. S.

REMEMBER.

This chair has nickle-plated attachments and adjustable stirrups. You cannot buy as fine a Gynæcological chair as this of any other reliable make for less than $70 or $100.

No. 5.

The chair can be rigidly locked in any position. Physicians should order at once, as the special inducements we are offering only hold good for a limited time.

Manufactured by P. C. LEWIS MANUFACTURING CO.,

Box 229. CATSKILL, *N.* Y.

The World's Antipyretic, Analgesic and Anodyne.

EXCELLENT in all kinds of Headache. SAFE and SURE. Relieves Sciatica, Myalgia, Hemicrania, Typhoid Fever, and troubles due to irregularities of Menstruation. Works like a charm.

ANTIDOLOR

A GRAND SUBSTITUTE FOR MORPHIA.

AN ENTIRELY NEW

COAL TAR DERIVATIVE.

Put up for Physicians in two forms—POWERED and 5 GR. TABLETS.

Samples of each sent on application.

Trade Supplied by United States and Canada Jobbers.

ANTIDOLOR CHEMICAL COMPANY, SPRINGFIELD, ILLINOIS.

PRICE, PER OUNCE, 75 CENTS.

How can

The Gynecologist Successfully treat Those Patients

whom for any reason he cannot see sufficiently often, or who from lack of means are unable to pay for the frequent applications the case demands?

The Anderson Vaginal Capsule

is clearly indicated. The patient can be instructed to medicate the tampon with the remedy prescribed, and successfully follow out a systematic course of treatment, the physician calling at such intervals as the case requires.

NO handling of disagreeable drugs.
loss of medication in the introduction.
soiling of Linen.

Annoyance to the patient of frequent exposure avoided.

By mail prepaid on receipt of price, 60c, per box.

THE HALL CAPSULE CO.,
Manufacturing Chemists, CINCINNATI, O.

It is a

Frequent Remark Of the Physician

where can I find an absorbent for **Tampons, or External Dressings**, that is elastic in its composition, will not pack down, harden, or become "soggy" by contact with suppurating surfaces, as does **cotton**, and one that **overcomes the irritating** and non-absorbent properties of **wool.**

Doctor, WE CAN SUPPLY YOU.

To the preparation we have given the name

"Oulo-Kutun"

from the Greek word *oulos* (wool) and the Arabic word *kutun* (cotton).

Oulo-Kutun is soft, elastic, non-irritating and very absorbent. It retains its **elasticity when wet** and will not form into hard lumps. It is twice as bulky as cotton, will go much farther, and by comparison as to **results** is cheaper than either wool or cotton.

A sample will be sent postpaid to any address on receipt of two cents in stamps.

Price per pound $1.40, or by mail prepaid $1.60

THE HALL CAPSULE CO.,
Manufacturing Chemists,
CINCINNATI, O.

How do You do

to avoid mistakes on the part of the careless patient when two capsuled prescriptions are given, to be taken in alternation?

OR,

when you desire for any reason to **disguise** the contents of a capsule or change the **appearance** of a prescription in capsule form, without changing its character?

DOCTOR, we would suggest in such cases the use of the

Ruby Capsule

They are made in the same sizes as the ordinary white capsule of the best **French Gelatin**, with a harmless red coloring matter, **are perfectly soluble, are perfectly fitted, are attractive and desirable for a "change."**

Sample box of 1,000 Capsules sent postpaid on receipt of one dollar. Box of 100 for fifteen cts.

THE HALL CAPSULE CO.
Manufacturing Chemists,
PATENT APPLIED FOR. CINCINNATI, O.

"A REJUVENATION

FOLLOWS ITS USE:

A GENERAL NERVOUS SYSTEM

becomes balanced and invigorated."

From the favorable reports of the medical profession and after a thorough investigation of its properties we have been induced to add to the well known formula of our

PIL CLEOPATRINE

EXTRACT OF Saw Palmetto (abal Serrulata) making the best combination in pill form for **Brain Exhaustion, Sexual Neurasthenia**, and all diseases arising from **Mental or Physical Debility.**

The formula is designed with special reference to the glands of the reproductive organs, tending to **increase their activity and promote their secretive power.**

It is recommended in cases of enlarged prostate, wasting of Testes, such as follows Varicocele, or is induced by Masturbation, and which is often present in sexual impotency or debility from seminal losses.

Its action is that of a great vitalizer, and in presenting it to the notice of the profession, we claim for our Pil Cleopatrine its general superiority as a **Aphrodisiac** specifically affecting the organs of generation in male and female. We invite your investigation.

In bottles of 100 pills, $1.00 net, by mail prepaid on receipt of price.

THE HALL CAPSULE CO.,
Manufacturing Chemists, CINCINNATI, O., U. S. A.

THE ORIGINAL. THE GENUINE. THE ETHICAL.

For the Prescriptions of Medical Men Only.

Concentrated Extract

TRIFOLIUM COMPOUND.

Formula, EDWIN F. RUSH, M. D.

ONE BOTTLE MAKES THREE TO SIX PINTS OF SYRUP.

A SCRAP OF HISTORY.

The formula for Trifolium Compound was originated by Edwin F. Rush, M. D., now of Chicago, but formerly resident physician at Hot Springs, Ark. The combination was used in the form of a concentrated extract, diluted with water or syrup, or full strength, as occasion required. When introduced to the profession by another manufacturer the wishes of Dr. Rush were disregarded, and it was offered in the form of a syrup, *weak in medicinal strength*, and therefore *unreliable as a medicinal agent*, on account of the very large dose necessary to produce the required therapeutic effect.

The sale of the weak syrup has been discouraged by the medical profession, as the aim of the manufacturers appears to have been to push its sale as a "patent medicine" direct to the general public. Dr. Rush has very properly withdrawn the use of his name and formula from such an unprofessional article, and assigned Wm. S. Merrell Chemical Co. *the sole right* to use his original formula and his name in connection therewith.

EXTRACT TRIFOLIUM COMP.---Merrell.

—Concentrated.—

$1.25 per Bottle. **$12.00 per Dozen.**

MAKE YOUR OWN SYRUP AS WANTED.

FORMULA—Concentrated Syrup Trifolium Comp.

℞ Extract Trifolium Co.—Merrell..... .....Four fl. ounces.
Essence Wintergreen..... .....One fluid ounce.
Simple Syrup..... .....Eleven fluid ounces.

FORMULA No. 2—Syrup Trifolium Comp.—Strength of the Commercial Syrup.

℞ Ext. Trifolium Co.—Merrell.....Two fluid ounces.
Essence Wintergreen.....One fluid ounce.
Simple Syrup..... .....Q. S. to make one pint.

Send for Dr. Rush Monograph on "Syphilis and Diseases of the Blood and Skin."

The Wm. S Merrell Chemical Co.,

Manufacturing Chemists,

Laboratories: CINCINNATI.

New York Office and Warehouse: 96 Maiden Lane, New York City.

☞Prices current and valued literature sent free on application.

For sale by Dr. H. Baer, Charleston, S. C.; Murray Drug Co., Columbia, S. C.; Lamar & Rankin Drug Co., Atlanta, Ga.

Cut-Off Fingers.

Dr. J. M. T. Pinney ("Bull, Johns Hopkins Hospital") reports the case of a man in whom the fingers of the left hand accidentally slipped beneath the knife of a machine used for cutting blocks of tin. The ends of the ring and middle fingers were cut cleanly off. The middle finger was cut off just below the last joint, directly through the last phalanx. The ring finger was cut off just at the root of the nail. He picked the fingers up, wrapped them in a piece of newspaper, and put them in his pocket. Dr. Pinney placed the ends of the fingers in a basin of warm water with no antiseptic whatever. The fingers were soaked for a while in about a 1-2000 hot bichloride solution. Then, having fastened the edges of both the portions of finger which had been cut off and the fingers themselves, Dr. Pinney very carefully adjusted the two ends and replaced them. This consumed over half an hour before they were replaced and the dressing applied, making in all seven hours. Four sutures were put in each case through the skin, one on each side, one on the dorsal and one on the palmar surface. Then narrow strips of crepe lisse were brought over the ends of the fingers on the back, front, and sides. These were held in place by flexible collodion, and kept the ends in perfect apposition. The two fingers were bound together and placed on a palmar splint, and a large antiseptic dressing applied. At the end of a week's time the fingers looked remarkably well. The patient declared that sensation was present in the ends of the fingers, but this was very doubtful. Several weeks later the wound had entirely healed by first intention. Three years later there was perfect motion and perfect sensation, and only the slightest deformity in the ring finger to indicate the point of union. It is difficult to detect even the slightest scar in the middle finger.

Public Baths.

New York and Boston are doing more toward supplying the public baths than most other cities. In Boston these baths, which are under the charge of the Board of Health and are open during the four hot months of the year, were used 1,125,836 times during the past summer. Of the persons using them, 909,880 were men and boys, 216,947 women and girls.

Lightning Stroke.

Dr. S. M. Tancy, Port Republic, Va., ("Med. Brief.") reports the case of a thirty-five-year-old man who was riding beside a grove. A tall oak close by was struck by lightning, which ran down the tree to a small limb and off of the limb onto the patient's head, passed down his side to the lower part of the abdomen, there dividing and running down each lower limb, destroying all the scarf skin in its course, killing the horse upon which he was riding, and rendering him unconscious for several hours. Dr. Tancy, on his arrival, found all the hair upon the top of the head destroyed and the man in a semi-conscious condition. A month later all symptoms had disappeared except pain in the course of the current and loss of memory of recent events. Most of these cases reoover perfectly.—*Ex.*

A Good Prescription.

Dr. A. J. Skene is credited as being the author of the following prescription for a banquet:

℞ Extracti carnis in poculis . . . . . ℥ij.
Olivæ Hispanicæ . . . . . ℥ss.
Amygdalæ salsæ . . . . . ℥j.
Raphani, ... ℥ss.
Panis carnisque varietatis, ... ℥viij.
Astici cum condimento Auroro, ... ℥iv.
Vini Burdigalensi, ... ℥j.
Crusti glandii vitulini, modo Regino, . . lb.ss.
Calidi quoddam Washingtoniensis, . . ℥ij.
Acetariæ e pullia gallinaceis, ... ℥ij.
Acteriæ e astacis, ... ℥j.
Solani esculenti cum dondimento Mayonnaiseo, ℥j.
Vini Gallici, ... ℥vj.
Cremoris glacis vanillæ, ... ℥j.
Pastellæ varæi . . . . . gr.iij.
Pomæ diversæ, ... gr.v.
Caffeæ, ... ℥ij.
Spiriti frumenti, ... ad libitum.
Spiriti vini Gallici, ... ad libitum.
Aquæ puræ, ... q. s.
Herbæ Nicotanæ.

M.
Sig. ℥ij every five minutes. —*Review.*

Among the recent products that have been obtained from the Coal Tar series none has given better results than Antidolor. We have used it quite extensively, always giving most pleasing effects.

Length of Life.

According to life insurance statistics, it appears that commercial travelers and agents live longer than men in any other kind of business, notwithstanding the hazards which attend transportation by rail and water. Next to them come dentists, teachers and professors, including music teachers. Then come hatters, clergymen and missionaries. Next come bankers and capitalists, who seem to live just a trifle longer than the butchers and marketmen. Lawyers and jewelers follow, and they are succeeded on the list by merchants, peddlers, milkmen and pawnbrokers. Then come gardeners, laborers, civil engineers and canvassers. Book-keepers and bank cashiers, as well as artists and architects, are ahead of newspaper men. They come in next with the printers, physicians and gentlemen who are not engaged in any active employment. Then follow the apothecaries and photographers, and after them in order, bankers, cigarmakers, real-estate agents, army officers, liquor dealers, mariners and naval officers. Shortest lived of all seem to be the auctioneers, boarding-house keepers, barbers and drivers.—*Review.*

It's a Mistake; There IS Something New Under the Sun.

Cod Liver Oil, after more than 150 years of use as a medicine, has become a prescription remedy, mixing readily with water, milk, liquors, and all fluid medicines, and will hold in suspension the mineral and vegetable salts that are soluble in water or glycerine. Strange to say, it is as pleasant to the patient as glycerine, and can be given unknown to the most delicate taste by mixing with aromatics; and stranger still the medical properties of Cod Liver Oil are manifested within 24 hours, instead of from four to six weeks, as with other preparations. See advertisement elsewhere of Cod-Liver Glycerine Co., main supply house, 113 North Eighth street, St. Louis.

Dukehart's Fluid Extract of Malt and hops, absolutely free from alcohol, for the cure of dyspepsia, debility, all wasting diseases, and for the use of nursing mothers. Combining the highest per cent. of diastase to be obtained from Canada barley, together with the bitter principle of hops.

TILDEN'S

FLUID EXT. OF ERGOT

(FORMULA OF 1874.)

The superiority of this preparation OVER ALL OTHERS, consists in the fact that our Ergot is manufactured by a process unknown to any other maker, whereby certain undesirable qualities are eliminated.

POINTS.

Uniformity of strength and action.

Does not nauseate.

Can be used hypodermically without leaving sores or forming abscesses.

The dose is smaller than others.

☞Samples furnished to Physicians FREE OF EXPENSE, upon application.

PREPARED ONLY BY

THE TILDEN CO.,

Established 1848. Incorporated 1893.

NEW LEBANON, N. Y.

Miscellaneous.

Passiflora in Cholera Infantum.

BY D. F. BICKFORD, M. D., ATLANTA, GA.

On Jan. 2d, about 10 a. m., I was called to see a child of Mr. A. On my arrival I found the patient very nervous, temperature 101.5, pulse 120, respiration 45, bowels discharging every few minutes, the discharges watery and very foul. It was also vomiting every few minutes, and any fluid entering the stomach was immediately rejected.

The history of the case was this: The child had been taken sick four days before, and, although the mother administered all the known domestic remedies, it gradually grew worse. I at once diagnosed cholera infantum, and prescribed accordingly, and in harmony with the indications, and left.

Called next day at 9 a. m.; found patient somewhat better, had rested reasonably well during night, and had nursed some during the morning; directed the old treatment to be continued, and retired.

At 2:30 that afternoon was called hastily, child was worse and parents very much alarmed. On arriving at the bedside, found patient very much excited, tossing from side to side, almost in spasms. On examining the patient closely, found stomach contracted into a hard lump, which would relax for a few moments, only to contract again more severely.

I then commenced the administration of anti-spasmodics, and continued for some hours without the least modification of symptoms, although given freely and frequently. Being close to my office, and having exhausted about all I knew, I slipped home and consulted my books, but found little I had not already done; but I was in, and to stay until there was some change, and knowing I must do something, I went back with a full supply and continued my efforts until 8 p. m., without any perceptible change. I finally concluded that I must do something, as the parents were fast losing confidence.

Having heard and read a great deal about the spasmodic and hypnotic properties of passiflora, I concluded if possible to secure some and try it as a last resort.

I called the father aside, and told him there was only one more thing I knew of, and if that failed I would ask for a consultation. He, of course consented, and I hastened to the office of a brother physician and procured a small vial of passiflora, and, at his suggestion, some powders with one-tenth grain bromide and one grain bismuth, were prepared. Hastening back to my patient, I gave one powder, which was immediately thrown up. Waited a few minutes and gave a teaspoonful of passiflora. After twenty minutes I gave another powder, and in twenty minutes more repeated the dose of passiflora, which was given the third time after a lapse of twenty minutes. The child gradually became quiet, and in one hour and a half after the administration of the first dose was sleeping nicely. After waiting a few minutes I left, and returned an hour later to find mother and child enjoying a sweet and refreshing sleep, something they had not done for days.

I called next morning and found patient much better, bowels and stomach quiet; continued gtts. 5 of passiflora every hour, and one powder every three hours. Patient improved rapidly, and two days later was discharged. I was called upon two days later to administer a cathartic.

Trusting that this remedy may assist some of the younger members of the profession, as it did me out of a very unpleasant situation, and that these few remarks may stimulate our older members to investigate it thoroughly, I leave it to your kind consideration.

Impure Bromides.

Helbing's Pharmacological Record has an important statement concerning the undue proportions of potassium chlorate that are found in the bromides. An examination made by Helbing and Passmore show that it is a serious matter to buy the Potash salt at the present time without having it carefully analyzed as to the percentage of chlorides it may contain. The importance of purity in a drug of this nature is very great, and will receive the earnest heed of neurologists everywhere.—*Journal American Medical Association.*

[PEACOCK'S BROMIDES are of known purity, and should be used when bromides are indicated, as they are the *only* preparation of *Chemically Pure* Bromides on the market.]

Schumacher's Infant Food.

We wish to call especial attention of our readers to the advertisement of Schumacher's Infant Food, manufactured by the American Cereal Co., Akron, Ohio. This food, under analysis, has been proven to be the most natural substitute for mother's milk. Only use it to become convinced of its value. Please send to this office or the home office for samples.

The Nervous Origin of Jaundice.

At a recent meeting of the Massachusetts State Medical Society Dr. A. D. Rockwell read a paper on this subject. He said it is a well known fact that disturbance of the brain, both organic and functional, may very seriously interfere with the functional activity of distant organs. A cerebral disturbance may be the direct causative factor of very persistent derangements of the sexual apparatus. The bladder, intestines, stomach, and heart may also be disordered by diseases of the central nervous system as well as the kidney and the liver. So closely and so strangely are the vascular and the general nervous systems related to each other that their pathological conditions are often inseparably connected. The nervous system has an alliance so close with the functional activity of the secretory and excretory glands of the body that emotional disturbances, according to their character, act as depressants or excitants of the functional life of these organs. Some of the more common of these effects are every day familiar facts, as when the flow of tears is excited through the grief, or the secretion of saliva and gastric juice through the smell of food. In the same manner as the superficial glands are easily influenced, so in all probility are the blood-making or ductless glands regulated and controlled by the organic nervous system. Dr. Murchison, to whom the world is so much indebted for enlightment on this subject, asserted that not only was the secretion of bile interferred with by prolonged mental anxiety, worry, and incessant mental exertion, but that the principles of sanguification and blood change, in which the liver takes part, were frequently deranged from these same causes. He states that acute astrophy, in which the secreting cells are rapidly disintegrated, and the functions of the organ arrested, appears in many instances to have a purely nervous origin,

and very often the first symptoms of the disease have occurred immediately after a severe fright or an outburst of passion in a person previously healthy. An impression made upon the brain appears to be reflected to the liver and deranges its nutrition. Even cancer of the liver appears sometimes to result from the functional derangement induced in the first instance by mental trouble.—*Boston Medical and Surgical Journal.*

Female Voice in Sexual Disease.

Dr. C. Henri Leonard, in a paper read at the sixty-second annual meeting of the American Medical Association (*Jour. Am. Med. Ass.*) discusses this question and cites numerous cases where uterine and ovarian disease has resulted in an impairment of the voice. In one case, from a high *mezzo* the range was reduced to a *contralto*, and in other cases the maculine tones were creeping in. At the time of menstruation it is claimed to be a common occurrence for singers to find changes in the purity of tone or range of voice. The reason for this is found in the intimate connection of the nerves that supply the vocal organs (spinal accessory) and the uterus through the medium of solar plexus. Taking into consideration the fact that from the lowest to the highest note the vocal cords vibrate from 572 to 1,606 times a second in soprano singers, and there being about 100 muscles which must be brought in coordination to produce perfect phonation, it is not surprising that some slight reflex trouble will have the result of causing changes in the voice.

In confirmation of his ideas Dr. Leonard cites the case of a patient of Dr. Severs, of Fort Wayne, who, from reflex influences, had not spoken above a whisper for two years. In this case cure resulted from treatment of rectal trouble.—*Annals of Gynæcology and Pead.*

Different Treatment.

Patient—"As we have known each other so long, doctor, I do not intend to insult you by paying your bill. But I have left you a handsome legacy in my will."

Physician—"Very kind of you, I am sure. Allow me to look at that prescription again; there is a slight alteration I should like to make in it."—*New York Herald.*

A Substitute for Intubation.

L. L. Palmer, M. D., in the *Ontario Medical Journal*, Oct. 1892, says that from reports, one might conclude that intubation was short lived. He has observed that most criticism comes from those of little or no experience, or unable to perform intubation. He believes it has come to stay, and is more preferable than tracheotomy. But the majority of physicians are not equipped with O'Dwyer's tubes and many lives are lost that otherwise might be saved.

He says the indication for intubation is stenosidue to two conditions. (1) Inflammatory stupefaction. (2) Exudation. Both of which may combine to close the larynx, or either, predominating, may become so slack and extensive as to be the sole cause of dyspnœa, which if removed, almost normal respiration is restored.

For this purpose he has devised a fine brush, upon a bent platinum probe—hair pointing upward; so that it is easily introduced and offers greatest resistance on removal. The same probe may be used, wound around with absorbent cotton. This should be carefully introduced into the larynx, using no force.

Not more than five or six seconds should be occupied in introducing and removing it. The membrane is readily removed. If any remain, it is so detached that it is brought up by the child's coughing.

This procedure should be used as often as necessary.

He concludes that no physician is justified in allowing a child to die asphyxiated, from diphtheretic membrane, without resorting to this simple expedient.—*Philadelphia Medical and Surgical Journal.*

Just the thing in this fast living age, where nervous diseases are the natural consequences of our habits and mode of living, it is difficult to decide what remedy will effect a cure, as there are so many on the market. We should choose the most effective preparation for nervous diseases and general debility known, which is Dukehart's Extract of Malt and Hops, as it has been used and approved by prominent physicians everywhere, and should require no further commendation. The secret of its success and increasing sales is simply this: It is the best, and the best is always the cheapest. Price 50c. per bottle, 12 bottles for $5.

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FOR BOTH INTERNAL AND EXTERNAL USE.

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FORMULA.—LISTERINE is the essential antiseptic constituent of Thyme, Eucalyptus, Baptisia, Gaultheria and Mentha Arvensis, in combination. Each fluid drachm also contains two grains of refined and purified Benzo-boracic Acid.
DOSE.—Internally: One teaspoonful three or more times a day (as indicated), either full strength, or diluted, as necessary for varied conditions.

LISTERINE is a well-proven antiseptic agent—an antizymotic—especially useful in the management of catarrhal conditions of the mucous membrane, adapted to internal use and to make and maintain surgical cleanliness—asepsis—in the treatment of all parts of the human body, whether by spray, injection, irrigation, atomization, inhalation, or simple local application, and therefore characterized by its particular adaptability to the field of

PREVENTIVE MEDICINE—INDIVIDUAL PROPHYLAXIS.

LISTERINE destroys promptly all odors emanating from diseased gums and teeth, and will be found of great value when taken internally, in teaspoonful doses, to control the fermentative eructations of dyspepsia, and to disinfect the mouth, throat and stomach. It is a perfect tooth and mouth wash,

INDISPENSABLE FOR THE DENTAL TOILET.

DISEASES OF THE URIC ACID DIATHESIS.

LAMBERT'S LITHIATED HYDRANGEA.

RENAL ALTERATIVE—ANTI-LITHIC.

FORMULA.—Each fluid drachm of "LITHIATED HYDRANGEA" represents thirty grains FRESH HYDRANGEA and three grains of CHEMICALLY PURE Benzo-Salicylate of Lithia. Prepared by our improved process of osmosis, it is INVARIABLY of DEFINITE and UNIFORM therapeutic strength, and hence can be depended upon in clinical practice.
DOSE.—One or two teaspoonfuls four times a day (preferably between meals.)

Close clinical observation has caused Lambert's Lithiated Hydrangea to be regarded by physicians generally as a very valuable Kidney Alterative and Anti-lithic agent in the treatment of

Urinary Calculus, Gout, Rheumatism, Cystitis, Diabetes, Hæmaturia, Bright's Disease, Albuminuria, and Vesical Irritations Generally.

REALIZING that in many of the diseases in which LAMBERT'S LITHIATED HYDRANGEA has been found to possess great therapeutic value, it is of the highest importance that suitable diet be employed, we have had prepared for the convenience of physicians

DIETETIC NOTES,

suggesting the articles of food to be allowed or prohibited in several of these diseases. A book of these Dietetic Notes, each note perforated and convenient for the physician to detach and distribute to patients, supplied upon request, together with literature fully descriptive of LISTERINE AND LAMBERT'S LITHIATED HYDRANGEA.

LAMBERT PHARMACAL CO., St. Louis, U. S.

British, Canadian, French, Spanish, German and South American Trade Constantly Supplied.

Salophen, the New Remedy for Acute Rheumatism, is described by several writers as having given very satisfactory results in this condition without causing the gastric perturbations so commonly observed in active antirheumatics; and without inducing toxic phenomens of any kind. The doses administered varied from 45 to 120 grains, daily given fractically from four to six times within ten or twelve hours. An advantage of the remedy according to several observers, lies in the fact that it can, in all cases, be given in sufficient quantities to produce a useful effect. In cases in which very marked febrile symptom occurred conjointly with the other phenomena, they came under control in from 16 to 36 hours; Some practitioners used Salophen and Phenacetine in equal parts, in those cases of articular rheumatism, in which the pains were especially severe. The influence upon the inflammatory processes is described in all cases as having been well marked. In several instances, Salophen was given in powders with bicarbonate. Goldmann's method of administration was to give the remedy by itself on the tongue or in tablets made with starch and sugar of milk. The chemical composition of Salophen being in fact a form of salicylic acid, with a non toxic combination of phenolic acid, would have lead any experienced practitioner to expect from this remedy, the results which have been recently obtained. Of the value of Salophen in influenza, there is already a considerable amount of evidence. For this condition, it is often united to Phenacetine.

The Value of Losophan as a remedy in cutaneous disorders seems to depend chiefly upon its influence in the dermato-mycoses. Saalfeld has lately described some very satisfactory results from the use of Losophan in herps tonsurans, pityriasis versicolor, and diseases determined by certain parasitic influences. He also derived favorable effects from its employment in frurigo, chronic infiltrated eczema, sycosis vulgaris, acute vulgaris and rosecea. Losophan seems to be contra-indicated in some of the inflammatory dermatoses on account of its marked effects as a dermatic stimulant. It is used in 1 to 2 per cent. solutions of a mixture consisting of 75 per cent. of water. An ointment is also employed containing 1 to 2 parts of Losophan in 98 or 99 parts of Lanolin or vaseline. Chemically, Losophan is a triioacresol which results from the action of iodine upon m-oxytolnic acid in an alkaline carbonate or hydrate. It contains about 80 per cent of iodine.

Catalgine.

This is a new preparation, manufactured by The Catalgine Chemical Co., of Lebanon, Mo. Its formula is as follows:

Acetanilid C. P.	- - -	20.
Benzo-Salicylate Ammonium	- -	23.50
" "	Cæffien - -	14.25
" "	Potassium - -	7.
" "	Sodium - - -	35.25

This is certainly a nice formula, and we have found it to act especially satisfactory in the treatment of acute rheumatism. We have also used it a great deal in different forms of neuralgia, with gratifying results. Ordinarily this class of remedies is followed by depression and other ill effects. It is not the case with Catalgine. Send to the manufacturers for free samples and try it.

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For the past six months we have been using Tyndale's Compound Syrup of Eucalyptus a great deal in our practice. In coughs and colds, and especially Bronchitis, few remedies are more valuable or can be given with more satisfactory results. 'Tis a most palatable remedy and can be borne by the most delicate and sensitive stomachs. Its antiseptic properties add greatly to its value.

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It will not blow out.
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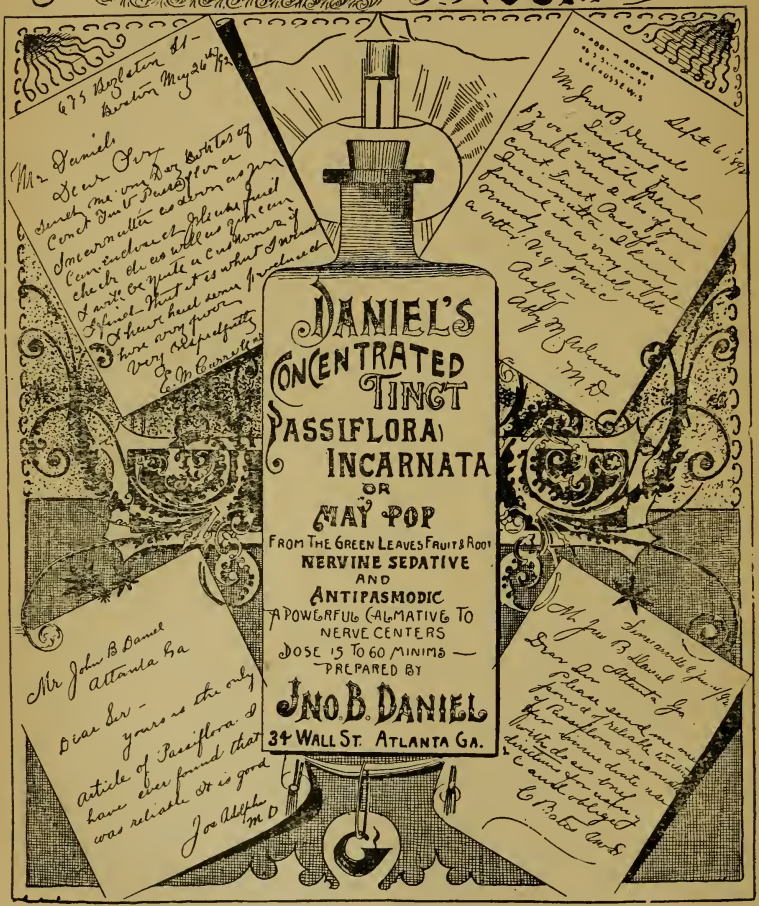

THE GREATEST DISCOVERY OF THE AGE

Charlotte Medical Journal.

Vol. II. CHARLOTTE, N. C., APRIL, 1893. No. 4.

Original Communications.

Rectal Injections in Obstetrical Cases.

BY J. R. IRWIN, M. D., CROFT, N. C.

Parturition is a natural process; but in civilized life, the woman needs some assistance, and every attention that will contribute to her comfort or facilitate labor should be rendered. From the casual way in which enemata are recommended by authors and writers on obstetrical matters, only suggesting their employment "in case the bowels haven't acted," we would naturally infer that they are of little consequence. And if the practitioner relies upon what the patient says in regard to the condition of her bowels, he will rarely meet with an indication for their use, for she almost invariably says that her bowels have acted previous to or since the beginning of labor. Perhaps this may be correct, but few women escape during the last weeks of pregnancy from an accumulation of fecal matter, which, in some instances, is enormous in quantity. Therefore most women need them to relieve this condition, and their administration should be one of a series of attentions that the physician should give his patient. By so doing he not only relieves a slight mechanical impediment to the process of labor, but he thus prevents the involuntary defecation that so often takes place with the last expulsive pains, to the mortification of the patient and utter disgust of the attending physician.

Another advantage to be secured by a thorough evacuation of the contents of the bowels is, wounds of the fourchette or slight perineal lacerations are not contaminated with fecal matter, and subsequent infection from this source is thus avoided. Of course the genitalia are to be bathed with an antiseptic solution after each movement of the bowels. There is one point I have not seen sufficiently emphasized. A woman who passes through the act of

parturition with accumulations in her bowels enters the puerperal state with a distended intestinal canal and the bowels continue sluggish. In some instances I have no doubt that the retained feces produce an intestinal irritation which may be continued to the serous coat and may assume the proportions of peritoneal irritation and even that of acute peritonitis.

What has been said so far, relates to the employment of rectal injections to aid in securing the best possible condition in which the woman should pass into the puerperium. There is another use for which I wish to recommend them, and which so far as I know has never been suggested to increase the expulsive character of the uterine contractions, render them more efficient and thus expedite the delivery of the child. Some writers regard the pains of labor as peristaltic and that they begin in the muscles of the ligaments and proceed from them to the fundus and thence to the cervix. Now I claim that an injection does more than simply wash out the rectum, it probably stimulates the whole intestinal tract to vigorous peristaltic action, and the stimulus given to the peristalsis of the bowel is reflexly conveyed to the uterus.

The time and manner of administration have much to do with the results to be obtained. When labor is progressing well and the object is only to evacuate the bowels, any time will do to administer an injection, only be sure to use it in time to entirely relieve the bowels before labor is terminated. To increase the vigor of the contractions, where they are insufficient, or perhaps interrupted by fatigue and exhausted nerve power due to a tedious first stage, give at the beginning of the second stage and notice the increased activity given to the uterine contractions. Or when the membranes have ruptured early and perhaps the labor has slowly advanced and the head engaged in the excavation, and each succeeding pain leaves it where it was previous to its occurrence, a rectal injection will restore the expulsive character and strength of the pains and hasten delivery.

Method of Employment.—Use from two to four pints of tepid water, and to make it still more stimulating add two to three ounces of chloride of sodium. The patient should be placed on the left side, with the hips near the edge of the bed and the thighs flexed upon the abdomen, and the fluid slowly pumped into the rectum. The pumping must stop during a uterine contraction or

a desire to empty the bowels and the patient directed to prevent the escape of the fluid. If necessary the administrator must assist by supporting the perineum and structures around the anus with the hand and a folded towel. After it has been retained until the desire to go to stool becomes too urgent to be resisted, the patient is allowed to get upon the commode if in the early stage of labor, if in the latter stage the bed-pan is to be used. The efforts of stool also bring into play the abdominal muscles which some females refrain from using, lest it increase their sufferings. So rectal injections possess a wider range of utility than is usually accorded them and should be more universally employed in obstetric practice, which forms a large and important part of the duties of most of us, and it is well occasionally to leave the discussion of rare and difficult cases to review the common things of our art.

A Rare Case.

BY S. L. MONTGOMERY, M. D., CONCORD, N. C.

Some time ago I received a note from Dr. A, who lives in the northern part of Union county, to assist him in a case of obstetrics. I answered the summons as quickly as possible. When I reached the house I found a woman thirty years of age, unmarried (primepara). She presented every symptom of having undergone severe suffering, but was then free from pain. Dr. A. said he reached the house a few hours before and found the woman in the condition which I will now describe. I got everything in readiness for my examination and proceeded to make it. My hand glided along smoothly till I reached a point about midway between the knee and vulva. At this point I felt something lying between the thighs of the woman, which I thought of course was the child, and remarked to Dr. A. that the child had been born. He answered by saying that he had made the same mistake; that it was not the child but the uterus. Thinking that he certainly must be mistaken, I raised the bed clothing and found to my very great surprise that the uterus had been expelled with child intact.

I had read of procidentia, but I had never read of complete procidentia with child in utero. Upon further examination I found the os dilated to about the size of a silver dollar with a laceration of about 1-8 of an inch at mouth, which I suppose was made by

the midwife, into whose hands this woman had been for twenty-four hours before Dr. A's arrival. I introduced my index finger, *by sight and not faith*, and found the head of the fœtus well impacted against the mouth. Although it was plain what should be done, neither Dr. A. or myself were willing to go further without the assistance of an older physician, we both being very young at the time.

After due time Dr. B. came. He, like us (though he had had thirty years' experience) had never seen such a case. The woman was not suffering, but thinking it *best not to leave her in that condition*, and satisfying ourselves as to the certainty of the death of the fœtus, craniotomy was performed, the blunt hook introduced, and a child of about six months was delivered. The placenta was removed without difficulty, the uterus was washed out thoroughly with carbolized water and returned to as near its proper position as possible. The woman recovered without an unpleasant symptom, and as far as I know is living now. I don't know whether our mode of delivery was in keeping with the modern rules of obstetrics or not, and the only guarantee we had of the correctness of our mode was the living woman.

I have mentioned the case to several of the prominent physicians in North Carolina, and none of them have ever had a similar case, and I have never been able to find much literature on the subject.

A Very Interesting Case.

BY F. M. WINCHESTER, M. D., MADGE, N. C.

MADGE, N. C., February 28th, 1893.

Was called, in great haste, on the night of February 9th, to Mrs. H. S. Found her flooding most terribly. Her husband said she was between five and six months in pregnancy. Examination revealed the os uteri considerably dilated and flabby.

Miscarriage inevitable. Further examination convinced me that I had "my first case" of placenta previa. Could distinctly feel the placenta presenting with what seemed a fleshy mass of some kind, about the size of an ordinary fœtal head, *at full term*, near the middle of it. The hemorrhage was frightful. Hastened delivery by all means in my power, and in a very few minutes had her delivered of (1st) the placenta with a mass of some kind within it, and (2d) an ordinary normal fœtus of about six months growth.

The patient was of course greatly prostrated from loss of blood, etc., but being of a hardy, vigorous constitution, soon rallied and made a "good recovery."

After seeing her comfortable I turned to examine more closely the product of the labor, and found as stated a normal fœtus of about six months' development, with a cord about twenty inches long attached it to a placenta, rather larger than ordinary, but normal in other respects, except this large mass in the centre of it. On tearing away the placenta I found this large tumor enclosed within a sack of its own; but so intimately was this sac connected with the placental mass that I was compelled to use a knife in dissecting it off.

On opening this sac I found another *abnormal* fœtus or monstrosity. It had the lower limbs well developed and rather larger than those of its twin, a well-formed pelvis and sexual organs (male), and what appeared to be a normal abdomen and spine up to the umbilicus, where it was cut short off and rounded up neatly. There was no sign of spine, thorax, limbs, head or anything else above the naval cord, which came right out from the upper end of it. This cord was only about one and a-half inches long and was continuous with the sac which enclosed the whole thing. Both conceptions were evidently nourished from the same placenta.

This is the case as I found it, as nearly as I can describe it. Perhaps a short history of the pregnancy will be of interest here. The mother is about twenty years of age; been married four years; three previous miscarriages; but no living children. In every case there was some deformity of the fœtus. *The parents are first cousins.* Her general health is good; menses regular up to July, 1892, when she "missed" one term. About August 1st, 1892, had a severe hemorrhage, and as she thought "a miscarriage." About three weeks later another profuse hemorrhage, which she stooped by using "spice tea." Soon after this, not more than two or three weeks, noticed a hard lump in left side, just above the rim of the pelvis, which continued to grow, but never moved or changed its position in the least until she miscarried on February 9th, 1893; quickened January 1st, 1893.

Now how was this monster developed *within the placenta?* How did it get there? Was there a previous conception and threatened abortion in August, and did the placenta of the second child attach

itself to the uterine wall near to or over the product of the first conception? Or were both fœtuses the result of one coitus?

What was the cause of the deformity? etc.

A New Era in Medicine.

BY E. R. ALBIN, M. D., ST. LOUIS, MO.

The history of medicine is as interesting as the history of any nation, however diversified may have been the form of government. The physician everywhere and at all times has been considered a man of superior science, regardless of the extent of his ability. Even among the savages and barbarians "The Medicine Man" is considered the representative of a learned science.

The true science of medicine is nature's laws, fixed and unchangeable, co-existent with nature itself, while the written laws of medicine are but the opinions of men. Waves of medical opinion have swept over the entire profession, from time to time, like the wave of public opinion on all subjects of grave importance, and the causes in each are the same, either some new conditions or opinions.

In ancient times diseases were called devils, and were supposed to reside in the veins, and to have an individual or spiritual existence. Until the present century disease was considered an entity, and treated accordingly. As I have said, the veins were supposed to be the parts of the system inhabited by these devils, and the efforts to remove these monsters were heroic. Blood letting was performed when the blood was supposed to be its home, or if the alementary canal was suspected, emetics and cathartics were given, and the sweat box was used when the tissues was supected.

And why was this so? It was but a logical conclusion, for disease was supposed to be a being which had taken possession of the individual, and as it was supposed to be a monster, the means to remove it should be heroic and severe.

Every army has a large conservative element whom the aggressive call cowards, and the medical army is no exception. In the days of heroic blood-letting the conservative practitioner gave the least work to the undertaker. Yet, if disease was a being with its home in the blood, blood-letting would have been the natural solution of the problem. It finally dawned on the professional mind

that disease was not a being, but merely a perverted condition of the natural system, and that individual vitality in disease is always below par, no difference how high the temperature nor raving the delirium. We now realize that measures which depress correspondingly lesson the chance of recovery, and the outgrowth is the present method of treating all diseases on the supportive plan, with a decrease in the mortuary percentage.

That the patient needs support during the treatment tending to correct perverted nature in all diseases is now almost universally conceded by the profession. But the nature of that support is a matter of much diversity of opinion. While nutrition is the most essential in the treatment of all diseases, I cannot refrain from saying that the science of surgery is far in advance of the practice of medicine. The practitioner has not been studying sufficiently the pathogenices of his drugs, and while they have been made more palatable than they were formerly, still there is room for advances in making them pleasant for the patient. We can see all around us old chronics who are but the result of overdosing with indigestible drugs; the conditions in one may represent in the aggregate the errors of many physicians, and may truthfully be called "a bundle of contradictions." If we knew our remedies better we would not resort to so many vague prescriptions which I am satisfied is the cause of many cases of indigestion and other ills which are constantly puzzling the physician.

I believe there is a remedy for every disease, and it only remains for the student of medicine to find and learn to judiciously apply it. I contend that in any case of material fever we need not resort to too many remedies if we knew medicine better. In wasting diseases like marasmus or catarrh of the stomach or bowels, or phthisis-pulmonalis, we need an hydro-carbon reconstructive when the patient possesses power to digest it, on account of its ready assimilation after digestion, and the storage in the system of excesses for future use; while other reconstructives cannot be thus stored in the system. Cod liver oil has stood at the head of the list for a century and a half, but is by nature very difficult to digest, and very unpalatable. Emulsions are soapy mixtures and unfit for the chemistry of digestion. A pleasant and digestible preparation of cod liver oil has long been sought for by the profession, and that has remained for my friend and fellow practitioner

of this city—Dr. J. E. Chambers—to obtain in Cod Liver Glycerine, which is a pleasant preparation and mixes with water, requiring no digestion, and is in itself a digestive stimulant. It is manufactured for professional use only, under his supervision, and cod liver oil has really become a proscription remedy.

I have used cod liver glycerine in many diseases, both acute and chronic, but have had more experience with it in acute diseases. I use it in all catarrhal diseases, and have found it has a special affinity for all mucous membranes, and have been more than surprised at its quick results. I use it associated with quinine, iron and strychnine for anemia, and with similar or other combinations, according to the indications, during the convalescent period of all diseases. It is an everyday prescription for bronchial and lung diseases; in fact, after thorough experience, it has become my favorite remedy. I consider it the most valuable preparation of cod liver oil, as all medicines can be used as adjuncts to it, and by mixing with the digestive fluids and admitting of dilution with water, it is readily absorbed, and we thereby get the medical effects of cod liver oil at once without waiting for from four to six weeks as with other preparations. It is beyond question the coming remedy for all tuberculous conditions, or combined with mercury or the iodide of potassium in syphilis.

Phenacetine.

Since its first introduction into medicine the field of usefulness of Phenacetine has been greatly extended and it has gained a prominent and permanent place in the physicians' armamentarium. The popularity which this remedy enjoys is attributable both to its efficacy and safety. Phenacetine is the antipyretic and analgesic par excellence, possessing the two-fold properties of reducing the fever and relieving the pains in inflammatory diseases. In acute inflammations of the respiratory tract its therapeutic value is now fully recognized. Administered at the commencement of an acute tonsilitis, pharyngitis and rhinitis, it frequently jugulates the disease, or at any rate greatly lessons the inflammation, pains and other discomforts. In pneumonia it surpasses the other antipyretics in that it reduces the fever, relieves the pain and sleeplessness without weakening the heart—a point of the utmost importance. In the treatment of influenza—a disease still quite

prevalent in this country—Phenacetine, according to the testimony of many authorities, may be considered as almost a specific. Prof. Delafield, of New York, has found no remedy so reliable in the treatment of influenza and its complication, such as severe headache, or neuralgia, as Phenacetine administered in doses of 5 grains every two hours. Other authorities, among whom may be mentioned Profs. Da Costa and Hare, of Philadelphia, Dr. Cyrus Edson, of New York, and Dr. Dudley Reynolds, of Louisville, have derived equally good results from the remedy in this disease. Dr. W. F. Hutchinson, of Providence, R. I., places Phenacetine first in the list of remedies for the relief of insomnia and pain in the permanent neuroses following grippe, and states that in combination with iron it represents the best tonic for the adynamic conditions of long-continued nervous prostration from whatever cause. The analgesic properties of Phenacetine are nowhere more strikingly exhibited than in the treatment of the various neuralgias, such as sciatica, intercostal neuralgia, headaches, and in these cases it has to a great extent replaced morphine and other anodynes. The paroxysms of whooping cough are promptly relieved by dose of one-half to one grain every two to six hours, and in the febrile affections of childhood, such as measles, scarletina, the remedy will be found an efficient and safe antipyretic and sedative. There is also ample testimony at hand that Phenacetine is one of the most reliable antipyretics in the treatment of typhoid and malarial fevers, and it should certainly be given a trial in infectious fevers both on account of its febrifugi, sedative and antiseptic properties.

DULÚTH, MINN., February 5, 1893.

THE SEARLE & HERETH CO., Chicago, Ill.:

Gents—I have a very interesting case to report. Mrs. B, aged 30, married eighteen months, a handsome brunette of French and Canadian parentage, came to see me the day I received the trial bottle of Tritica, and I gave her 4 ounces of the medicine and directed her to return as soon as the medicine was used and report all of her symptoms and the effect, if any, of the medicine. She returned at the end of two days, and this is the history: Immediately after her marriage she began to have pain in the region of the bladder and difficult and painful micturition; pain on the first attempt at coition was so severe that the husband had to desist,

but he returned to the attack with vaseline as a helper, and succeeded in accomplishing the ruin of her hyman and also in producing a very alarming hemorrhage, which was controlled with ice and compresses. When at the end of a week he made another assault he succeeded in making an entrance, but she declared that the connection was per rectum.

She had enough of married life and left the husband's home and returned to that of her mother. She had so much pain that she called a doctor, who gave her an infusion of buchu and uri ursi. [She showed me 38 prescriptions and they cover the field.] She got no relief. After a period of three months she was persuaded to return to her husband. After patiently waiting for two months he was voluntarily given permission to try again and see if he could find the proper place for his instrument of torture. He evidently did, but with difficulty, and she was worse for it and confined to her bed. She has consulted 22 out of the 45 or 50 doctors in the place and no benefit derived from any of them. She came to me; would have done so before, but for the reason that she had been told I would not treat her without first making an examination. Examination revealed a double vagina. One a perfectly natural one, the other separated by a thin membrane, was no more than a portion of the natural vagina, such as would be made by inserting a knife blade three-fourth of an inch wide in one of the folds of the vagina at the extreme outer opening and puncturing it, carrying the knife just under the membrane on the left side up to the vaginal connection with the uterus. But strangely enough the man's penis had found this slit instead of the more pretentious vagina, and the urethra was located in it. I cut the partition wall out at its point of attachment all around and a tampon of absorbent cotton and wool was made to fit and inserted, after saturating it with an antiseptic solution. The urethra was treated at first with suppositories and afterwards the whole bladder washed out with salol resocin and boric acid solutions. *Tritica* was of decided benefit from the first. Contrary to orders a "*little, just a little*," sexual intercourse was indulged in. When the tampon was removed and I had a case of cystitis that caused me to blaspheme. I finally secured the patient in a room in my own house, and after promising the husband that if there was any more of that kind of thing done I should do it myself, I determinued to see what virtue there was

in *Tritica*. (For the purpose I had my druggist secure a supply.) I gave it internally and I used a ten per cent. solution to wash out the bladder. The result was marvelous. I have practiced medicine twenty years and never saw an inflammation yield so rapidly. The lady says she will never again take a doctor's medicine who does not make an examination. She is well now and pregnant. (I didn't do the copulative act either.)

I have prescribed Tritica for the sporting women who are so often afflicted with the urethral catarrh and find it to act better than most any other remedy. Pichi, alternated with Tritica, often gives me good results.

I think I may safely say that the claims for Tritica are very modest, as it is a valuable medicine in all bladder and prostatic troubles of the male or female. I have no hesitation in using it for children as well as adults, and in the recent epidemic of scarlatina, I gave it *ad libitum* and always with comfort to the patient and satisfaction to myself.

I am, truly yours,

GEO. D. SWAIN, M. D.

Tonic Stimulants—The Coca of Peru.

That all men and women feel the weariness of life is testified by the fact that the people of all nations and climes have the universal habit of daily seeking a restorative and stimulant in one of the vegetable products which contain a substance or alkaloid capable of exercising a definite effect on the nervous systems. Thus, the Chinese and Japanese sip their tea, and the English, following their example, brew the five o'clock cup of the fragrant herb to sustain them in the day's work. The Arab and Turk seek, like the French and Germans, restorative powers in the aromatic coffee berry, the Cingalese chew the betel nut, and the natives of Peru, on the slopes of the Andes, find in coca leaves a principle which sustains the body in fatigue and comforts the mind in hopelessness. Von Bibra says of coca: "It satisfies the hungry, lends new strength to the weary and fatigued, and makes the unhappy forget his grief." What, then, is this strange substance which seems to conceal a fairy's wand?

Coca is obtained from the leaves of a shrub-like plant called the erythroxylon coca. It is a native of Peru and Bolivia, where it

has been cultivated with the greatest care from the remotest antiquity. When Peru was conquered by the Spaniards in the sixteenth century, and the ancient and interesting people of this country were discovered, it was found that their Incas, or kings, looked upon the cultivation of the coca plantations as a public and national duty, and also that the strange custom prevailed among the peruvians of chewing the leaves of the coca plant during frequent and short periods of repose specially set aside for this purpose. This custom prevails to this day in Peru and Bolivia.

The physical effects of coca are salutary, and in many respects more remarkable than the mental. It is universally acknowledged that coca stills hunger, overcomes drowsiness, and increases bodily activity. All travelers in the Andes bear testimony to the wonderful power shown by the Indians of enduring fatigue, cold, wet and exposure, with only the scantiest allowance of poor food, if they are supplied with coca. The life of the Indian of the Andes is one of extraordinary toil and hardship. His diet consists mainly of a small quantity of maize and frost-dried potatoes. He is constantly exposed to the intense heat of the plains, or to the terrible cold of the high plateaus of the Cordilleras. The toil exacted of him in the mines and the plantations is excessive, but he is yet able to perform, not exceptionally, but constantly, and as a matter of daily life, the most astonishing feats of endurance on a diet which would be absolute starvation to a European, or even for a time without food at all, by the aid of the power which coca gives. The most striking stories are told of the men engaged in the postal service, who, half naked, traverse the icy slopes of the Andes, carrying the heavy mail bag. These men walk from 200 to 300 miles, crossing the mountain by paths rising 13,000 and 14,000 feet above the sea level. Their scanty clothing is an ill-protection against fierce snowstorms, the intense cold, and the rarefied air of the Andes. Their food for the journey consists of from one to two pounds of dried maize and potatoes, but if supplied with sufficient coca to chew, they endure cold, hunger, fatigue and sleeplessness, not only without complaint, but without even seeming to be aware of them. In like manner the Indian laborers in the mines of the Cordilleras, whose toil is spoken of as incessant and excessive, and performed in damp, cold and darkness; the shepherds tending their flocks of alpacas on the bleak pampas, and the farmers irrigating their fields

at night in mid-winter on the high plateaus, standing often knee-deep in icy water, and exposed to cutting blasts, are all said to be equally inured to a life of surprising hardship and privation by the daily use of coca. It is stated, however, that though no hermit or monk ever lived so ascetic a life as these poor Indians, yet the appetite for food is only stayed, not destroyed, by coca, and that if any one is kind and generous enough to feed them they eat with voracity and evident enjoyment. Spaniards who go to work on the mines cannot stand the great hardships of the life and the inclemency of the Cordilleras till they take to the regular use of coca. Von Tschudi tells us that this life of silent endurance and bitter abnegation may be much prolonged, even in one instance to 130 years.

The other remarkable effect of coca is the influence it exercises in the respiratory centres, so that the rarefied air of the higher altitudes of the Andes can be breathed without the distress usually occasioned at the height of thirteen or fourteen thousand feet above the sea. All travelers speak of the extraordinary way the Indian porteas will keep up with the quick pace of the mule along the roughest mountain paths without ever showing any sign of breathlessness.

Though wonderful, but little credited, stories were told for two centuries of the staying powers of coca leaves, no attempt was made to introduce them into Europe, and scientifically to test their value either as dietetic or therapeutic agents until Mariana, of Paris, began his researches.*

I have had considerable experience of the value of Mariani's Wine of Coca under exceptional circumstances. Under pressure of time, for public *viva voce* medical work, I found that I could work for from fourteen to sixteen hours a day for weeks together, without mental or physical fatigue or bad after results, if I took a small daily dose of Mariani wine. My modicum was a bottle a week, discontinued immediately my task was done. Recently, when making a long convalescence from influenza, in which depressing cardiac symptoms were marked, I found again aforesaid Mariana wine a good and reliable restorative. I have no reluctance in saying that if I had to accomplish some severe work which drew exhaustingly on my full mental work under pressure, or attending

* See his excellent work on "Coca and its Therapeutic Application."

patients through serious illness, I would unhesitatingly, and with good conscience, seek the support and power of endurance this marvelous preparation of coca can give.

Mr. Eber Caudwell published an interesting account in the *British Medical Journal* of the effect it had on himself in enabling him to go through long hours of toil without sleep, and while preserving his full mental activity and vigor. Singers find that Coca Mariani enables them to inspire more deeply, and to hold their breath longer than they could otherwise do. Lennox Browne and Morell Mackenzie highly recommend it.

The scientific study of cocaine has led to a better comprehension of the mysterious qualities of the coca leaf. The first effect is sedative, rapidly followed by stimulation, in which the heart-beats are quickened, the nervous system becomes more active, the intelligence more acute, and the muscles pass more easily into a state of contraction. Dr. Mantagazza says that when he was under the influence of coca he had an irresistible inclination to gymnastic exercise. The absence of the sense of hunger seems to be due not only to the anæsthetic effect of the cocaine on the nerve ends of the stomach, but also to the fact that coca is an actual economizer of food, and so modifies the vital processes in muscle as to affect its chemical activity, and render it capable of performing an equal and greater amount of work with a lesser consumption of carbohydrates. (Stockman.) The absence of emaciation or subsequent debility or other bad results after the most exalted powers of the organism have been called forth, point to coca as being more than a nerve stimulant, but also an actual economizer of the bodily expenditure. If it diminishes the consumption of carbohydrates during muscular activity; that is to say, enables the machine to work with less fuel, less oxygen will be required, and hence is explained the effect coca has in preventing breathlessness when ascending high mountains. Two much stress cannot be laid on the importance of using only a reliable preparation of the drug.—*The London Hospital.*

A good baby powder is appreciated by every mother, and we know of none better than the compound talcum powder of Julius Fehr. It is valuable as well in the form of a toilet powder, and no household should be without it.

Practical Observations on the Treatment of Typhoid Fever.

BY R. L. CAYNE, A. M., M. D., OF LEXINGTON. N. C.

During a practice of many years, and a large experience in the treatment of typhoid fever, I have formed some opinions relative to the disease at variance with those generally held by the profession, and I deem it not out of place to put them on record in the following paper, that my brethren may accept or reject them, according as their combined and better judgment may determine. These opinions are heterodox, but are drawn solely from my own experience, and, like most old physicians, I shall probably hold to them, whether any one agrees with me or not.

Tanner says: "Hæmorrhage is among the most unfavorable symptoms" which can occur in this disease; and doubtless all will agree with him in believing that it is not only one of the most unfavorable, but is also one of the most surely fatal complications which can possibly arise if it be not speedily arrested. This applies to all hæmorrhages of any consequence, but more especially to hæmorrhage from the bowels; yet, from my experience, I am of the opinion that if such hæmorrhages are arrested before too great prostration follows, the symptoms in the case are all ameliorated, and the patient goes on to a more speedy recovery. I have seen a great many cases of hæmorrhage from the bowels, in a large number of which great quantities of blood were lost; but I have never had but two fatal cases, and in both of these I was not notified of the condition until after the patients were dead.

After giving the statistics from Murchison, Louis, Leibermeister, Griesinger, Turpin and others, Hutchison, in Pepper's "System of Medicine," says: "Of Leibermeister's 127 cases, 49, and of Griesinger's 32 cases, 10 terminated fatally; 3 of my own cases ended in death * * * *. In the face of facts such as these, there have not been wanting authors to assert that the effect of the hæmorrhage was sometimes beneficial. Chief among these are the celebrated Irish physician, Graves, and his devoted admirer, Trousseau."

Now, from my own experience as given above, I am compelled to agree with Graves and Trousseau, rather than with the others quoted, in spite of their statistics; and I have seen many a case in

which the effect of the hæmorrhage seemed to be beneficial when it was arrested before dangerous collapse came on.

Flint says: "A rare, but somewhat characteristic complication is inflammation of one or both of the parotid glands. It leads to a notable enlargement, and the appearance is like ordinary mumps. But unlike the affection just named, in the great majority of cases suppuration takes place * * * This complication adds to the danger, and retards convalescence."

On the same subject, Hutchison says: "Swelling of the parotid gland occurs in typhoid fever * * *. It is most frequently met with in bad cases * * *, and may terminate in resolutiou or suppuration. I have seen it three times only * * *. One of my cases was fatal; the other ended in recovery, as did the third case, I believe. Murchison saw it in only six cases, five of which were fatal. According to Hoffman, sixteen cases were found at Balse * * * , seven of the sixteen ending fatally. Trousseau looks upon these swellings as a very grave accident, and says that he has scarcely seen a case recover * * * Chomel, on the other hand, is said to have regarded them as critical and auspicious."

When I was quite a young man, and had just begun the practice of medicine, I heard an old physician say that a typhoid fever patient of his would certainly die because he had an abscess under each ear, and that he never knew such a case to recover. In about two weeks afterwards, one of my own patients developed such a condition, and I need scarcely say how much frightened I was, and especially when I learned that the old doctor's case did die. My patient had severe inflammation of both parotid glands which resulted in suppuration, and it became necessary to feed him for three weeks through the cracks between his teeth, and to support him by means of nutrient and stimulating enemata. He had also a large abscess in the calf of the right leg; but, in spite of it all, he recovered. Since these, I have treated many another similar case, and never had one to die; and, as a consequence, whenever I have a typhoid patient with parotiditis, whether it results in suppuration or not, or in an abscess, or a boil anywhere on the external surface of his head, body or limbs, I hail it as a favorable omen, and agree with Chomel in regarding it as "critical and auspicious."

Again, I do not believe there is any certain and invariable char-

acteristic *temperature* in typhoid fever. Hartshorne says: "An attack of disease in which, on the second day, the heat in the axilla is as high as 104°, is not typhoid fever; and the same exclusion applies if, from the fourth to the eleventh day, the temperature falls below 103°." Now, I am sure I have seen cases of genuine typhoid fever in which the initial temperature was higher on the second day than at any subsequent period of the attack (as high as 104° or 105° or more), and I have treated well-marked cases too, which were dangerous, and sometimes fatal, in which the temperature, at no time during the attack, exceeded 102°.

The truth is, I know of no disease in which the temperature is so variable in different cases. These things being so, I am convinced that temperature alone by no means marks the full gravity of a case, nor is it, taken by itself, a pathognomonic symptom.

It is, no doubt, true that destructive metamorphosis goes on more rapidly, and heart-exhaustion is more imminent, in cases of prolonged high temperature; yet it remains true also, that typhoid fever sometimes proves fatal from hæmorrhage, perforation, and other causes, in cases in which the temperature is never high.

While on the temperature allow me to say that I do not like quinine as an antipyretic in this disease; and as a tonic it has not answered as well in my hands as the infusion of serpentaria, because, given in either way, it almost invariably adds to the patient's discomfort, and seems sometimes to hasten the onset of nervous symptoms, if it does not really cause them.

Antipyrin, antifebrin, and some others of the coal tar derivatives, have, in some instances, answered well in my practice, but they are uncertain in their effects; and sometimes, when least expected, the prostration which follows their use more than counterbalances the benefits.

So my experience leads me to believe that there is no antipyretic so safe, so sure, and so reliable, as *cold water*. The cold bath, or pack, may be used with advantage, but frequent sponging all over the surface of the body with cold, acidulated water, has been of great service to me, and is a perfectly safe procedure, which very generally adds greatly to the patient's comfort.

Cold water or bladders or bags of ice applied to the whole head, but more especially to the occiput and nape of the neck, is a most potent antipyretic measure. So, also, cold water poured gently

over the head, for a half hour or more at a time, will very materially lower a high temperature, and is about as good an antipyretic as I have ever seen used.

A diet of milk alone has not answered as well with my cases as a diet of milk alternated with good animal soups, or broths, and sometimes with eggs in the form of egg-nog.

The practice of constantly prescribing new remedies, and dispensing with those that have been well tried, is a most pernicious fashion, and has, no doubt, led to an untimely death.

In fact, in this disease, more than in any other, the *nimia diligentia medendi*, either with old or new remedies, has aided and abetted the work of the destroying angel; and observation teaches me that he is the most successful practitioner who feeds well, stimulates judiciously, has his patients well cared for and faithfully nursed, and treats symptoms promptly, as they arise—that is, by the so-called expectant plan.

And finally, I am fully persuaded that it requires as much good judgment to know when to withhold medicine in typhoid fever as it does to know when to administer it.

A Prominent German pharmacist was tried not long ago for manslaughter ("Western Druggists"), the victim having died from the effects of a gout remedy sold by the defendant. The remedy consisted of compound tincture of colchium, with printed directions for its administration. The deceased was shown to have swallowed at a single dose the ten fold amount ordered in the directions. The defendant was pronounced innocent, on the ground that no one can be held responsible for the ignorance or gross carelessness of another.

A Case of Nausea.

Office Boy—Charlie has vomited his position.

Book-Keeper—Jerry, you should use your words correctly. A man can't vomit his position.

Office Boy—He can't eh? Well Charlie did. He threw it up.

American operating chairs and tables are having an active demand in Europe. The W. D. Allison Company has recently forwarded a large consignment of these goods to London physicians-

An Old Doctor's Advice to a Young Lady Friend.

Some things are foolish and false in the world,
And some are worthy and true;
Some ships sail the seas with the false colors unfurled,
And some have an honest crew.

Please hear and forgive your solicitous friend,
Who proffers advice unsought;
To keep you from harm is his sole aim and end,
By wit with experience bought.

Then carefully read when this meets your eye,
Of these forever beware:—
Of the man who his mustache and whiskers doth dye,
And the woman who "blondines" her hair.

Rosewood and mahogany need no veneer,
Curled maple and cherry no graining;
If worthy the stuff, it is prone to appear
What it is, without stucco or staining.

Seems Nature to fail in constructing her child,
Do eyes, hair and skin fail to blend?
The changes of men are bungling and wild,
For they know not her secrets and trend.

Then carefully read when this meets your eye,
Of these forever beware:—
Of the man who his mustache and whiskers doth dye,
And the woman who "blondines" her hair.

W. F. M.

The Army Medical Board.

This Board will be in session in New York City, N. Y., during April, 1893, for the examination of candidates for appointment to the Medical Corps of the United States Army, to fill existing vacancies. Persons desiring to present themselves for examination by the Board will make application to the Secretary of War, before March 15, 1893, for the necessary invitation, stating the date and place of birth, the place and state of permanent residence, the fact of American citizenship, the name of the medical college from whence they were graduated, and a record of service in hospital, if any, from the authorities thereof. The application should be accompanied by certificates based on personal knowledge, from at least two physicians of repute, as to professional standing, character and moral habits. The candidate must be between 21 and 28 years of age, and a graduate from a regular medical college, as evidence of which his diploma must be submitted to the Board. Further information regarding the examination may be obtained by addressing C. Sutherland, Surgeon General U. S. Army, Washington, D. C.

There are at present ten vacancies to be filled.—*Md. Monthly.*

SYR. HYPOPHOS. CO., FELLOWS

Containing the Essential Elements of the Animal Organization—Potash and Lime;

The Oxidising Agents—Iron and Manganese;

The Tonics—Quinine and Strychnine;

And the Vitalizing Constituent—Phosphorus; the whole combined in the form of a Syrup with a **Slightly Alkaline Reaction.**

It Differs in its Effects from all Analagous Preparations; and it possesses the important properties of being pleasant to the taste, easily borne by the stomach, and harmless under prolonged use.

It has Gained a Wide Reputation, particularly in the treatment of Pulmonary Tuberculosis, Chronic Bronchitis, and other affections of the respiratory organs. It has also been employed with much success in various nervous and debilitating diseases.

Its Curative Power is largely attributable to its stimulant, tonic, and nutritive properties, by means of which the energy of the system is recruited.

Its Action is Prompt: it stimulates the appetite and the digestion, it promotes assimilation, and it enters directly into the circulation with the food products.

The prescribed dose produces a feeling of buoyancy, and removes depression and melancholy; *hence the preparation is of great value in the treatment of mental and nervous affections.* From the fact, also, that it exerts a double tonic influence, and produces a healthy flow of the secretions, its use is indicated in a wide range of diseases.

NOTICE -- CAUTION.

The success of Fellow's Sprup of Hypophosphites has tempted certain persons to offer imitations of it for sale. Mr. Fellows, who has examined samples of these, **finds that no two of them are identical,** and that all of them differ from the original in composition, in freedom from acid reaction, in susceptibility to the effects of oxygen when exposed to light or heat, **in the property of retaining the strychnine in solution,** and in the medicinal effects.

As these cheap and inefficient substitutes are frequently dispensed instead of the genuine preparation, physicians are earnestly requested, when prescribing the Syrup, to write "Syr. Hypophos. **Fellows.**"

As a further precaution, it is advisable that the Syrup should be ordered in the original bottles; the distinguishing marks which the bottles (and the wrappers surrounding them) can then be examined, and the genuineness—or otherwise—of the contents thereby proved.

Medical Letters may be addressed to

Mr. FELLOWS, 48 Vesey Street, New York.

Charlotte Medical Journal.

E. C. REGISTER, M. D., J. C. MONTGOMERY, M. D.,

Editors and Publishers,

No. 36 South Tryon Street, Charlotte, N. C.

SUBSCRIPTION, $2.50 PER YEAR.

Articles intended for the Original Department of the Charlotte Medical Journal will be accepted only with the understanding that they are contributed to it exclusively.

DR. HODGES, of Wilmington, is soon to build a sanitarium in that city. It will be opened all the year and will be principally for the treatment of diseases of children. Dr. Hodges is one of the most prominent physicians of North Carolina, and we predict that the sanitarium will be a success.

THE Elixir Six Iodides sustains itself in the confidence of the medical profession as a most formidable weapon in the treatment of pernicious anæmia, many cases of skin disease, scrofula and syphilis in its various stages. We ask our readers to give it a trial, for where an alterative and tonic is demanded it can be depended upon. See their ad. in this Journal.

YOU will notice in this issue the advertisement of the Detroit Pharmacal Co. This house is one of the most reliable in the country, and one of their newest products is Apodyna, whose base is a coal tar derivative. It is very extensively used as an antipyretic, analgesic and anti-rheumatic. It has the endorsement of a great many of our leading physicians. Notice the advertisement and send for free samples.

WE call special attention of our readers to the interesting and valuable article written by Dr. John R. Irwin, of Croft, N. C., which appears as the opening article in this issue. Also the two very uncommon and unusual cases which have been carefully prepared and reported by Dr. S. L. Montgomery, of Concord, and Dr. F. E. Winchester, of Madge, N. C. We wish to thank these gentlemen for their kind interest taken in our Journal, and we feel sure that the preceding articles will be read with much profit and pleasure.

FULL-FLEDGED DOCTORS.

THE Chattanooga Medical College closed for the season on March 14th, granting license to thirty students. Rev. J. P. McFerrin, D. D., delivered the annual address. Dr. E. A. Cobleigh, Dean of the Faculty, was master of ceremonies. This closes another prosperous year for this college.

THE RIP VAN WINKLE RECLINING ROCKER.

RECENTLY we have had the pleasure of examining minutely a chair from C. P. Lewis, Catskill, N. Y., or as it is otherwise well known by the name of "The Rip Van Winkle Reclining Rocker." The chair, with its handsome embossed leather covering, its comfortable seatings, easy manipulation, quickness of its alteration from an office to a gynæcological chair, makes it one of the most beautiful, convenient and valuable chairs ever placed on the market. It can be bought either with the gynæcological attachments or without them. The chair can be changed in a moment to almost any position, either as an office, lounging chair, or for gynæcological purposes. We would be glad for our readers to see the chair. Send for catalogue and prices.

A NATIONAL QUARANTINE FOR THE PREVENTION OF CHOLERA.

WE sincerely hope that the present session of Congress will establish a national quarantine. 'Tis only a question of time when a quarantine must come, and the quicker the better. At a recent meeting held at the New York Academy of Medicine it was strongly urged that such a law be enacted, and it is to be hoped that our law-makers will rise to the dignity and importance of the occasion and give this question a careful and thoughtful consideration. This is a question of dreadful import, laden with so much possible disaster, and should be met with calmness, and means adopted to prevent its ingress. It has been suggested by some that the President appoint an Officer of Public Health as a member of his Cabinet. If this is the best way, all right. Let everybody do his whole duty to prevent the ingress of this dreaded foe.

BOARD OF HEALTH FOR THE CITY OF CHARLOTTE.

A Board of Health was organized in this city February 24th. Dr. H. M. Wilder was elected Superintendent. Organizations of this kind are especially needed at this time. The danger of an epidemic of cholera in this country is so great that we should be thoroughly organized. Our superintendent has had a great deal of experience in this line, and in case an epidemic of any kind should come we will be as well prepared to stamp it out as any city in this country.

DOCTORS AND THE DAILY PAPERS.

ONE of the leading city papers, taking as a text the reticence of the physicians who attended Mr Blaine, reads the medical profession a long lecture on its ignorance. It demands that doctors should express themselves in simple, direct English instead of resorting to technical terms. It manifests its joy over a bill now pending in the State legislature which requires doctors to write their prescriptions in English.

It is supposed that every man knows his own business best, but the practice of medicine is the exception to this rule. Few men there are, and fewer women, who do not regard themselves as competent to pick flaws in the treatment of every case attended by a physician. Who has met a man who could refrain from prescribing for a cold? He may live in Japan, where Sir Edwin Arnold says colds are practically unknown, but he is yet to be discovered in America. Because a physician declines to betray professional secrets and disregard the wishes of his patient and his family, his disinclination to talk to furnish a newspaper with news is set down to ignorance. Because he of necessity resorts to technical terms to describe conditions for which there are no equivalents in simple direct English, he is hiding his ignorance behind big sounding words, and posing as a monument of learning and skill. What profession is there which has not its technicalities, invaluable to it, but Greek to outsiders? If this criticism is valid the printer should forsake his "pi," handle his "shooting-stick" no more, forswear "quoins" and "lock up forms" forever.

As to writing prescriptions in English, that is easily enough done, but it will make it hard for the druggist who finds on his

shelves two or more drugs with the same common name, and harder for the patient, who may or may not get what is intended for him. Medicine is more nearly international than any other science, and the difficulties caused by writing prescriptions in the language of the country instead of in Latin is best understood by those who read the French journals and find it imposssible to learn the drug which a learned writer describes by its common name. The common names of drugs differ in different localities. In New England "Unguentum" or "Anguentum" is the common name of mercurial ointment. What South-westener will fail to recognize nux-vomica in the "ox-vomit" called for by the man whose chickens are being carried off by hawks? If the legislature will give the profession a weapon to wield against quacks, make the requirements for permission to practice severe, and enforce them thoroughly, it will do more to protect the public health than by attempting to regulate technical terms whether used in prescriptions or not.

The above editorial is taken from the Western Medical Reporter. It has been at least a universal custom to write prescriptions in Latin for many years. This is done because it can be universally understood. If an American would write a prescription in Itlay in Latin it would readily be filled, wherefore should it be written in English it would be impossible to compound it. What matters it to the laity whether I write Fowlers solution or Liquor potassii arsenitis; Dover's powders or Pulvis ipecacuanhae et opii; they know neither the physiological actions nor the therapeutical indications If they have the colic they will readily take either, not looking to see whether it is written in English or in Italian. If the newspapers had more to do or would more dutifully attend to politics or the sewerage condition of the town or the health of the community, give more fully the proceedings of the police meetings and let the technicalities of the medical profession alone, they would have more time to do their job work and collect from delinquent subscribers.

AN INTERESTING SUIT.

AN interesting suit has just begun in South Dakota by a woman against a physician—the woman having reached destitute circumstances by her husband having become a physical and moral wreck from the morphine habit, caused by the doctor's hypodermic

needle. The important point to be settled is whether or not hypodermic injections of morphine are lawful. 'Tis well established that few people form the habit of morphine when it is given for nervousness, and especially from the nervous effects of a spree. Nothing seems to counteract the ill effects of a debauch better than an hypodermic of morphine, and when once it is taken for this it is most sure to be repeated at the next spree, and where at the first one, only one dose was taken, at the second two, at the third three, and finally a little every day until it is impossible to "free themselves from the accursed chains that bind them." Effort after effort may be made, but fails, until finally the struggle is given up in hopeless despair and the man lapses into a mere intellectual machine, dreaming away his whole existence—a visionary, helpless human being.

EDITORIAL BRIEFS.

Dr. W. Cameron, of Hillsboro, died February 14th.

On the 26th of January Dr. Holmes' Sanitarium, at Rome. Ga., was destroyed by fire.

Mr. A. S. Aloe, the head of the leading surgical house of the west, died on January 6th.

The latest bacillus is that of the bank notes. Even bacillus have a tendency for bank notes.

One million seven hundred thousand is the number of prescriptions dispensed in St. Petersburg yearly.

It is rumored that John Hopkins University will consolidate with one of the smaller Colleges of Baltimore.

The British Register contains the names of one hundred and forty women who are duly qualified medical practitioners in London.

Dr. F. J. Young, of Bridgeport, died on January 4th. At the time of his death he was president of three associations of Fairfield county.

At the last meeting of the Neurological Section of the New York Academy of Medicine, Dr. Mary Putnam Jacobi was elected president. This is the first time in the history of the Academy of Medicine that feminine charms ever graced this position.

The State Medical Society of North Carolina will meet in Raleigh on May 9th, instead of Winston. The burning of the elegant Hotel Zinzendorf necessitated the change.

It is claimed by some that the microbe of articular rheumatism has been discovered. It seems that nearly all the "etiological" microbes have been discovered, but very few "curative" obes.

The Maltbie Chemical Co., of Buffalo, N. Y., whose advertisement appears in this issue, is one of the largest and most reliable houses in this country. Send for their catalogue and price list.

An act has been passed to incorporate a Medical College in the city of Charlotte, N. C., with no powers to graduate; giving the right to bring in bodies and dissect unknown and unclaimed bodies.

Iotrol, manufactured by the Clinton Pharmaceutical Co., of Syracuse, N. Y., is a most excellent preparation. It is superior to Iodoform and free from its objectionable odor. Send for samples and price.

It is reported that both the Rush Medical College and the College of Physieians and Surgeons of Chicago have offered to give up their entire property to the Chicago University. If this be true this should be one of the best medical institutions in the country.

The first successful case of Symphyseotomy in this country was lately done by Dr. B. C. Hirst at the University Maternity in Philadelphia. The mother bore the opperation well, and the child's life was saved. It is believed that this opperation has a brilliant future. (Woman's Medical Journal.)

The Woman's Medical Journal, a monthly journal devoted to the interest of women physicians is the name of a new journal which has reached our table. E. M. Rays-Gavitt, M. D., editor-in-chief, Claudia Q. Murphy, managing editor. The journal is clearly printed on excellent paper. We wish it success.

The law makers of New York are about to make a law compelling all midwives of that State to register before they are allowed to practice their calling. An examination on anatomy and physiology is one of the requirements for registration. A law of this kind is needed in North Carolina. I know of several communities in which this class of practice is controlled by midwives who are very ignorant, and as a rule are colored women.

Books Reviewed.

TRANSACTIONS OF THE MEDICAL SOCIETY OF THE STATE OF NORTH CAROLINA. Thirty-ninth Annual Session, held at Wilmington, N. C., May 17, 18 and 19, 1892. J. M. HAYS, M. D., Oxford, N. C., Secretary.

This is a paper bound volume of 350 pages, containing several most interesting papers and is indeed a creditable production, from either the standpoint of authorship or publisher.

HISTORY OF THE LIFE OF D. HAYES AGNEW, M. D., LL. D. By J. HOWE ADAMS, M.D. With fourteen full-page portraits and other illustrations. In one large Royal Octavo volume, 376 pages, Extra Cloth, beveled edges, $2.50 net; Half Morocco, gilt top, $3.50 net. Sold only by subscription. Philadelphia: The F. A. Davis Co., Publishers, 1914 and 1916 Cherry Street.

The Life of Agnew, written by J. Howe Adams, M. D., is a most beautiful and excellent book and will add greatly to the literature of the day. The book contains 376 pages in large, clear type; and ten handsome portraits of the celebrated surgeon in several stages of his life, from 1858 to 1890. The work is divided into sixteen chapters, each forming an interesting little volume of its own. The first chapter gives the lineage of the Agnew family. The earliest record of the Agnew family, which can be definitely and connectedly followed down to the present time, comes from Agneax, a quaint little village in northern France, from which the family derives its name, it being the custom in those days for the place to give the name to the family, and not the name the place as is now our custom. The second chapter treats in a very entertaining manner of the early life of Agnew. It shows from his early life that he was born to become a doctor, and in his own language, "My love for the profession was inborn, wrought into the very fibre of my mental organization, and inspired not by the honors at her command, but from the unspeakable satisfaction and pleasure of being able to use her resources for the benefit of our common humanity. Chapter 3 is devoted to his business adventure. He became one of the firm of a large iron mill, which, at the expiration of three years, made a complete failure.

When he had practiced medicine for three years and only meeting with comparative success, this business transaction seemed to offer to him brighter hopes and prospects, and he undertook it. When one views the success that crowned him in his profession after this failure, and the probability that Agnew's name would never have been known had this business adventure proven a suc-

cess, it seems that the hand of Providence was guiding him in his failure, and the same hand directed him to reach the goal of his ambition as a surgeon. So with chapter after chapter—each is filled with valuable items of this distinguished character. One of the most interesting chapters in the book is the one entitled the Garfield Case. 'Twas in that difficult case that Agnew's reputation caused him to be selected among counsellors at the couch of that wounded one for whose relief millions were anxiously watching. The jubilee given in honor of Dr. Agnew at the close of the 50th year of his professional life in Philadelphia seems to have been a happy occasion to him. In reply to a toast given by Dr. DaCosta he uttered the following: "Any man who has lived long in this world, and has taken a thoughtful retrospect of his past life, must be forced to confess that the influences and forces which have conspired to mould his character and shape his destiny, are most mysterious indeed. Plans constructed with infinite care have miscarried; fondly cherished hopes have been crushed with a shock; glowing anticipations, just about to become realizations, are dissipated in a moment into thin, viewless air, like earth mists before the morning sun. And now, gentlemen, this is a great honor which you have done me; to be the guest of such a company should satisfy the most exacting ambition. And let me say to each and all of my professional brethren here to-night that I have no words which can fittingly express the profound obligation under which I am placed by your generosity and kindness."

Other chapters are of equal interest, but space prevents elaboration. The publishers deserve great credit for this work, and we heartily recommend the book to our readers.

"An American Text Book, of the Theory and Practice of Medicine," by Pepper, Vol. I. W. B. Saunders, publisher. Philadelphia.

"Psychopathia Sexualis," by Dr. R. Von Kroft, Ebiny. The F. A. Davis Company, Publishers, Philadelphia.

These two interesting and valuable books will be reviewed in next issue.

DR. WILLIAM BECK, a young physician of Shell Lake, Wis., thrashed two editors in that city for publishing damaging reports on him. The Doctor has the satisfaction that public sentiment is on his side.

DR. C. E. ROSS, a native of Charlotte, and one of the physicians of the State Hospital at Morganton, N. C., is in the city visiting relations and friends. The Doctor is one of the brightest young physicians in this State, and has indeed fine prospects.

WE add to our best of advertisers the well known firm of H. K. Mulford Company. This is one of the largest and most responsible drug houses in this country. See their advertisement and note carefully their very interesting offer. The case of medicines that they offer for sale is a very choice selection, and the case itself is indeed a handsome pocket case, containing 24 vials, filled with their tablets and triturates, at the very low price of $3.

Death of A. S. Aloe.

It is with sincere regret that necessity compels us to chronicle the death of Mr. A. S. Aloe, the head of the foremost surgical instrument house of the west. Mr. Aloe died of Bright's disease, on the evening of January 6th. Born in Edinburg, Scotland, fifty-one years ago, Mr. Aloe came to St. Louis in 1861, and by constant and intelligent devotion to his business, built up an establishment that has earned and retained the esteem of the profession, especially of the middle and westetn States.

A doubly-sad feature of the demise of Mr. Aloe is that it was followed, two days later, by that of his daughter-in-law, wife of Mr. Sidney Aloe, following a confinement with twin boys a week before.

The sorrow of the young husband and bereaved brothers and widow is participated in by their many friends.—*Med. Fortnightly.*

"The Best Coal-Tar Preparations."

I find Antipuralgos the best coal tar preparation ever in use. I have given it a fair trial and am delighted to testify as to its wonderful power in the reduction of temperature; its freedom from depressing effects over the heart, and its prompt and efficient action in febrile conditions, whether malarial or typhoid in character. It is an agreeable remedy that acts without disturbing the stomach and is easily administered in powder or capsule. I shall be glad to continue its use and report upon its merits from time to time.

D. W. CUSHMAN, M. D., Cleveland, Ind.

Selections.

Doctor, Wash Your Feet in Cold Water.

John A. Henning, M. D., Garnett, Kan.

I fancy I see you smile when reading the heading of this article. Well please look more serious and follow me through. Yes, I emphatically say, doctor, wash your feet twice per week in a bucket of cold water right out of the well, and do not wipe them, let them dry before the stove. And practice it all the time the year round. I have thus practiced this for fifteen years, and what I have to say is from personal experience.

Washing the feet in a bucket of cold water not only keeps them clean, but stimulates the veins and capillaries to a normal action, and removing all effete matter and worn out tissue and giving innervation. In the winter season they will stay warm four times as long as a warm bath. Frequently of a cold winter's day, when I would have to be out all day in the cold, riding, by taking this bath in the morning I had warm feet all day. No use for overshoes. I am now sixty-three years old and never wore a pair of overshoes in my life, and never expect to so long as I do my duty.

If this is so, it certainly is a great duty; but it does more than keep your feet warm. It will keep the brain clear and bright, better memory, better ideas, better feeling, better judgment; the circulation equalized, normal. You say, how can this be? Why if this effete matter and worn out tissue is retained on the feet it will be, more or less, absorbed in the circulation, blunting the brain and nervous system, and in some instances, may be the cause of some severe nervous disease. Brother, wash your feet in cold water if you want to be bright, supple, jovial, clear-headed and happy.—*Chicago Medical Times.*

I have used *Elixir Six Iodides* for many years in the treatment of various forms of skin disease, syphilis in its different stages, and in fact I nearly always prescribe it in my practice when I desire *alterative* and *tonic* effects. My experience with it has been most satisfactory to my patients and to myself.

JOHN STARK, M. D., Kansas City, Mo.,
Grad. in Med. Royal College of Glasgow, Scotland; late A. A. Surg. U. S. Army; late Dean Kansas City Hosp. College of Med., &c.

My First Case.

BY G. A. WILLIAMS, M. D., BAY CITY, MICH.

My first case of obstetrics was somewhat unique, and of course made quite a lasting impression upon me. I was not yet a graduate, but I had attended two sessions and considered myself quite skillful and scientific. My preceptor took me in charge one day, and introduced me to an old colored lady who was about to be confined. This lady carried considerable weight with her—I believe she weighed about three hundred pounds—and, as the weather was very hot, the case proved to be quite interesting. I remembered having read somewhere that the doctor should sit down quietly and read a book, and wait for matters to develop, and not be too meddlesome. I found an old almanac, but could not read a word of it, for I had an attack of globus hystericus; and as I was trembling and gasping for breath, two old ladies came in—one of them was Ol' Auntie Smith, who was known as a great nurse. Ah, but wasn't this an angel's visit? The patient now had strong pains, and the nurse said: "Doctah, is you gwine to try a pain?" Never having seen a case before, and not understanding her, I tried to look wise and answered: "Bimeby." In a short time the labor was more advanced, and the old nurse called upon me again: "Please, doctah, yo' bettah 'zamine dis yer lady." Accordingly I passed my hand somewhere in the region of the vulvæ, and suddenly there was a tremendous gush and splashing sound which almost demoralized me; still I congratulated myself upon my bravery in this supposed case of "terrible hæmorrhage," and not wishing to alarm the bystanders by exposing my ghastly, blood-stained hand and arm, I remained petrified, as it were, in the same position. Just then the old nurse said: "Doctah, I reckon de wattahs is done broke, ain't dey?" Ye gods! what a relief this was to me! I suddenly remembered that there was such a thing as the rupture of the membranes, and, withdrawing my hand, it is needless to say I had more respect for that old nurse than for any lady I ever saw. The baby was born immediately, and with some encouragement and instructions, I recovered myself sufficiently to tie the cord. The baby was placed in a cradle, and the nurse exclaimed: "Yo' pufessional gen'lmen ginally waits 'bout a half ouah fur de afterbuf, don't you, doctah?" "Yes," said I, but

owing to the great strain upon my nerves, the reaction had now come on and I hadn't the remotest idea of what the old nurse meant. We didn't have to wait, however, for the afterbirth came away in a minute or two, and the patient herself exclaimed: "It's done come, Auntie; it's done come." The old nurse removed the afterbirth and soiled clothing carefully, and took a nice clean band and applied it snugly around the patient. And this was the end of one of the easiest and most natural cases I ever attended. While washing my hands in an adjoining room, I overheard the old nurse saying: "Dat ar young gen'lman's a mighty fine doctah; he 'minds one ob de doctahs down Souf, wen I lived in ole Virginny." These good old souls have long since passed away and crossed the river, where they are now resting under the shade trees.

The Therapeutic Merit of Combined Remedies.

BY STEPHEN J. CLARK, M. D., OF NEW YORK, N. Y.

In nearly every case where quinia is indicated, it can be advantageously combined with antikamnia, which thus becomes a valuable adjunct to quinia. Quinia, for example, is a most decided febrifuge and its action is usually promptly reliable; but when combined with this member of the aromatic series, its action is markedly increased. Some individuals, however, cannot take any of the coal-tar derivatives; consequently the use of antikamnia will be inhibited in such cases; on the other hand, some patients cannot take quinine.

An important benefit to be derived from the addition of antikamnia to quinine is that it removes the sense of fullness in the head, constriction about the forehead and tinnitus aurium—so common when the latter drug is administered alone; the disturbing action of quinia on the auditory nerve is suspended to a great extent, and the usual quinine deafness is absent. The combination of these agents in tablet form is a happy one.

The combination of these agents in tablet form is a happy one.

The combination of antikamnia is valuable in the racking headache, with high fever, attendant upon malarial disorders. It is likewise valuable in cases of periodical attacks of headache of non-defined origin; of the so-called "billious attacks;" of dengue; in neuralgia of the trigemini; in that of "ovarian catarrh;" and, in

short, in nearly every case where quinine would ordinarily be prescribed.

Binz claims specific antiseptic powers for quinia; other writers are in accord with him on this point, and report good results from large doses in septicæmia, pyæmia, puerperal fever, and erysipelas It is a germ destroyer of the bacilli of influenza (la grippe). A full dose of quinine and antikamnia will promptly relieve many cases of this disease. In the gastric catarrh of drunkards, this combination is valuable. Quinia is a poison to the minute organism—sarcina; and antikamnia exerts a soothing, quieting effect on the nerve filaments. A full dose of antikamnia and quinia will offen arrest a commencing pneumonia or pleuritis. This combination is also useful in the typho-malarial fever of the South—particularly for the hyperpyrexia—both quinia and antikamnia, as previously said, being decided fever reducers.

The germicide power of quinia is the explanation of its success in the treatment of malarial disturbances. Thus it is also a prophylatic against the various manifestations of malarial poison, and as such it can be relied on. The cause of malaria as a disease consists of pigmented bodies, which penetrate the interior of the red blood corpuscles—pigmanted bodies of various shapes and flaggellate organisms—both having amœboid movements—the filaments being in active vibration.

In meningeal troubles, attended by marked acceleration of the heart due to the rise in the fever temperature, full doses of quinine and antikamnia at intervals of, say, about four hours, will be productive of good. In measles, large doses of the combination at night—say ten grains of each for adults (doses for children in proportion), will relieve the distress of the catarrhal pneumonia, and modify, in great degree, the amount of the exudative products. The periodical neuroses which may be either regular or irregular in their manifestations, but which are dependent on the malarial germ for their origin, are all controllable by the combination of quinine and antikamnia. Examples of such neuroses are asthma, laryngismus stridulus, summer catarrh, etc. Indeed, for the hemicrania and neuralgias of malarial origin, the combination of quinine and antikamnia, just alluded to, may be declared *a specific,*

The dose of quinine may be made smaller than usual when administered with antikamnia. Thus, one or two tablets of two and

a half grains each of quinine and antikamnia will prove sufficient for great utility in puerperal mania, in the headaches of advanced age, accompanied with vertigo and despondency.

This combination is capable, by the combined influence of each drug on the nervous system and blood, of restraining all the processes which develop heat, organic changes, and muscular motion; therefore, it is "the one thing needful" in the treatment of the hyperpyrexia of malarial fevers. In the vast majority of cases, when necessary to administer quinine, if antikamnia be added to the prescription, the results will be surprising.

Formerly, the idea prevailed that in order to render the treatment of periodical fevers efficient, the gastro-intestinal tube should be cleaned out by emetics and cathartics. This, however, is a fallacy, as the conditions they are intended to remove depend mainly on the malarial poison, for which the combination of quinine and antikamnia is the specific cure.

In speaking of the treatment of pneumonia by quinine and antikamnia, Prof. Palmer says: "The effects desired, and certainly as a rule produced, are a decided reduction of temperature, a marked diminution in the frequency of the pulse, a decided moisture of the skin or free sweating, a slower and more easy respiration, or relief from pain, and the feeling of fullness of the chest, a diminution of the cough and of the tenacious and bloody character of the expectoration; and, in short, not only is there a checking of the fever, but of all evidences—general and local—of the pulmonary engorgement and inflammation."

In Meniere's disease, or "labyrinthine vertigo," this combination has, by persistent use, entirely removed the trouble in many cases. The curative effects of quinine and the coal-tar antipyretics in sunstroke are well known, and have been used recently with great benefit in numerous instances in this country and in India. In hysteria, and even in epilepsy, the combination of quinine and antikamnia is often indicated, and will frequently give the desired results. In whooping cough and hay fever, quinine and antikamnia will prove beneficial.

The tablets of equal parts of quinine and antikamnia, spoken of in this article, can be administeted by the rectum, with good effect. They should first be dissolved in whisky, and then water can be added in any quantity needed—always remembering the total quantity of each drug in such enemata.

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Child-Rape in Texas—An Unparalleled Case.

Mr. Editor :—Much has been said and much written about the recent execution of a negro by burning by the citizens of Paris and the surrounding country.

The citizenship of this place and all the surrounding country—for there was a general uprising of the people far and near who participated in the execution or sanctioned it by their presence—have been branded as murderers, demonds, etc. In fact, all the billingsgate epithets known to the English language have been applied to them by people who seem to lose sight of the crime committed by this monster in human shape. They seem to be ignorant of, or they totally disregard, the fact that the negro, Henry Smith, was guilty of a crime which, for enormity, fiendishness, and unfeeling brutality, stands without a parallel even among savages.

A little flaxen-haired girl, aged three years, eight months and five days, was picked up at her father's gate about nightfall by a tall, lean, raw-boned negro man, about 30 years of age and about 175 pounds weight. The negro carried the child to a secluded, unfrequented wood, on the outskirts of the city, and there, after night had drawn a dark curtain over the earth, with no eye but God's to witness the damnable deed, perpetrated a crime unheard of in the annals of history. Medical men, who have full knowledge of the anatomy of the parts and the anatomical relations of the genital organs of the female, and who know how small and undeveloped these organs are prior to puberty, may well ask the question, "How could a child of the age and size of this one be outrage or raped by a man * * * as this man had ?"

This qnestion as to how he accomplished the act ? was asked the rapist, and he answered, "I smothered the child's cries by putting my hand over her mouth. I then tore the parts and made them large enough to force an entrance." He further stated that he sat down with his back against a tree, and, after forcing the child's legs as far apart as he could, he accomplished the act of cohabitation by repeatedly jerking the child against his person.

The child was outrageously torn and mutilated. The examining physicians report complete laceration of the perineal body, the rupture connecting the vagina and abdominal cavity, so that the penis of the negro must have passed immediately into the abdominal cavity.

It was not learned, as the brutal negro did not seem to know, at what stage of this torture the child died.

The child was choked until its tongue lolled from its mouth and remained so. The bruises from the demon's grasp on its throat were plainly defined.

The presumption is that the first ravishment did not kill the child, and that he then choked it to death and then repeated the act, as he confessed to raping the child after it was dead.

These confessions were not made under torture, but wehn the negro believed he would have a trial and be sent to the penitentiary, or, to use his own language, "go to the pen for a number of years," which he said he didn't mind or care for.

This is the crime—a crime unknown to the laws of our country —which was perpetrated by the negro, Henry Smith, and for whose execution by fire and torture, inflicted by the father of the child, the people of Texas are branded as murderers, demons, barbarians, etc. Respectfully, J. M. FORT, M. D.

Paris, Texas, February 10th, 1893.

[He must be a heartless fool to adjudge the punishment for such a crime as too severe. The simple statement of facts warrants all that was done to such a scoundrel.—EDITOR *Virginia Medical Monthly*.]

Antipuralgos in Low Malarial Fever, with Complications.

In a female patient, age 14, in whom the menses was just appearing and following la grippe, who was taken with a low malarial fever with most intense headache—recurring every twenty-four hours and lasting six or eight hours—I gave quinine during the intervals with the only result of increasing the headache at the next paroxysm; tried codia with some relief, but vomiting of severe character followed. I then gave Antipuralgos and it acted like a charm; each attack was lighter and lighter and I have kept her on it for nearly three weeks, when I discharged her convalescent. This remedy I sincerely believe has a wide field of usefulness and will undoubtedly take precedence of all other remedies of this kind now before the profession. I shall continue to use it, and as its therapeutic value unfolds itself to judgment, I shall commend it accordingly. G. H. DAYTON, M. D., Lima, Ind.

Diurnules and Diurnal Tablet Triturates.

Messrs. Parke, Davis & Co., manufacturing chemists, 43 and 44 Holborn viaduct, London, have introduced a new mode of administering toxic drugs, which removes the difficulty some practitioners may have in remembering the maximum and minimum dose of each. The recognized maximum internal daily dose of the substance is subdivided into twelve equal divisions; these subdivisions are administered in the form of small yellow granules termed diurnules, also as diurnal tablet trituates. One diurnal or tablet is given every two hours if it is desired to adminster the full dose. If the full dose is not desired, the prescriber can easily regulate the quantity by giving the diurnules at longer intervals. The diurnul tablet triturates can be divided into two or four equal parts, each tablet being marked by lines. The tablet form admits of being crushed into powder or dissolved in water, so that they can be administered to children and to such patients as cannot take pills. We have received a portable case containing a dozen small bottles of various kinds of diurnules, comprising such toxic substances as aconitine, arsenious acid, perchloride of mercury, etc.; twelve of these granules contain a full daily dose for an adult. The diurnal tablet triturates are small circular tablets marked in four divisions, which can be easily separted by means of a knife. — *British Medical Journal*, Feb. 18, 1893.

Trional, under quite recent clinical tests, is found to have a special value in uncomplicated agrypnia, or wakefulness with a certain amount of excitement. In these cases it is said to have acted promptly and effectively in doses of 1 and 2 grammes. Trional is useful also in convalescence from the abuse of cocaine and morphine. Some of the reports state that doses of 2 grammes would usually procure for these patients a sleep of from 7 to 9 hours duration. According to a recent report of Boettier, dementia with hallucinations was very favorably influenced by Trional. The same writer reports 55 cases of insomnia, with physical disturbances in the insane. These were primary or secondary, or were accompanied by moderate delirium or motor restlessness. Doses of 1 to 2 grammes of Trional promptly induced a sleep of 6 to 10 hours. The full report of the cases referred to was published in the Berl. Klin. Woch., No. 42, 1892.

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The sale of the weak syrup has been discouraged by the medical profession, as the aim of the manufacturers appears to have been to push its sale as a "patent medicine" direct to the general public. Dr. Rush has very properly withdrawn the use of his name and formula from such an unprofessional article, and assigned Wm. S. Merrell Chemical Co. *the sole right* to use his original formula and his name in connection therewith.

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℞ Ext. Trifolium Co.—Merrell.....Two fluid ounces.
Essence Wintergreen.....One fluid ounce.
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whom for any reason he cannot see sufficiently often, or who from lack of means are unable to pay for the frequent applications the case demands?

The Anderson Vaginal Capsule

is clearly indicated. The patient can be instructed to medicate the tampon with the remedy prescribed, and successfully follow out a systematic course of treatment, the physician calling at such intervals as the case requires.

NO handling of disagreeable drugs. loss of medication in the introduction. soiling of Linen.

Annoyance to the patient of frequent exposure avoided.

By mail prepaid on receipt of price, 60c. per box.

THE HALL CAPSULE CO.,
Manufacturing Chemists, CINCINNATI, O.

It is a

Frequent Remark Of the Physician

where can I find an absorbent for **Tampons, or External Dressings,** that is elastic in its composition, will not pack down, harden, or become "soggy" by contact with suppurating surfaces, as does cotton, and one that overcomes the **irritating** and non-absorbent properties of **wool.**

Doctor, WE CAN SUPPLY YOU.

To the preparation we have given the name

"Oulo-Kutun"

from the Greek word *oulos* (wool) and the Arabic word *kutun* (cotton).

Oulo-Kutun is soft, elastic, non-irritating and very absorbent. It retains its **elasticity when wet** and will not form into hard lumps. It is twice as bulky as cotton, will go much farther, and by comparison as to **results** is cheaper than either wool or cotton.

A sample will be sent postpaid to any address on receipt of two cents in stamps.

Price per pound $1.40, or by mail prepaid $1.60

THE HALL CAPSULE CO.,
Manufacturing Chemists,
CINCINNATI, O.

How do You do

to avoid mistakes on the part of the careless patient when two capsuled prescriptions are given, to be taken in alternation?

OR,

when you desire for any reason to **disguise** the contents of a capsule or change the **appearance** of a prescription in capsule form, without changing its character?

DOCTOR, we would suggest in such cases the use of the

Ruby Capsule

They are made in the same sizes as the ordinary white capsule of the best **French Gelatin,** with a harmless red coloring matter, **are perfectly soluble, are perfectly fitted, are attractive and desirable for a "change."**

Sample box of 1,000 Capsules sent postpaid on receipt of one dollar. Box of 100 for fifteen cts.

THE HALL CAPSULE CO.
Manufacturing Chemists,
PATENT APPLIED FOR. CINCINNATI, O.

"A Rejuvenation

FOLLOWS ITS USE;

A GENERAL NERVOUS SYSTEM

becomes balanced and invigorated."

From the favorable reports of the medical profession and after a thorough investigation of its properties we have been induced to add to the well known formula of our

PIL CLEOPATRINE

EXTRACT OF Saw Palmetto (Sabal Serrulata) making the best combination in pill form for **Brain Exhaustion, Sexual Neurasthenia,** and all diseases arising from **Mental or Physical Debility.**

The formula is designed with special reference to the glands of the reproductive organs, tending to **increase their activity and promote their secretive power.**

It is recommended in cases of enlarged prostate, wasting of Testes, such as follows Varicocele, or is induced by Masturbation, and which is often present in sexual impotency or debility from seminal losses.

Its action is that of a great vitalizer, and in presenting it to the notice of the profession, we claim for our Pil Cleopatrine its general superiority as a **Aphrodisiac** specifically affecting the organs of generation in male and female. We invite your investigation.

In bottles of 100 pills, $1.00 net, by mail prepaid on receipt of price.

The HALL CAPSULE CO.,
Manufacturing Chemists, CINCINNATI, O., U. S. A.

A Dentist Before an Examining Board — Rich with Sublime Ignorance.

One Dr. (?) George Wilkins, a dentist of this city, went before the 44th judicial examining board to stand an examination for a licence to practice detistry in Texas, and the following were a few of the questions and answers — orthography, punctuation, capitals and all:

Question. "What is anatomy?" Ans. "desecting a body to find its component parts a composign of a body description of same." Q. "What are bones?" A. "hard calcareus substances found in human and animal beings." Q. "What is the skull?" A. "Cranium (head bones) the bones that protect or in close the Brain or nearves Centers." Q. Of how many bones is it composed?" A. "four." Q. "How are they divided?" A. Ocipital frontal and temperal." Q. "Name the bones of the face?" A. "two superiors and one in ferior maxilary and nasal." Q. "What important organ is contained within the cranium?" A. "the brane or nearve centers." Q. "How is it divided?" A. "in lobes." Q. "What is the superior maxillary?" A. "the under jaw bone." Q. "What is its shape, and how made up?" A. "like a (*Horse shoe with the heels turned out.*)" Q. "With what bone does it artciulate?" A. "superior maxillary." Q. Describe the Hyoid bone." A. "flat." Q. "Name some of the muscles of the face and head." A. "mastoid, alis quenaei superosis levator." Q. "How many muscles are inserted into the Hyoid?" A. "two." Q. From what main vessel do the arteries of the face take their origin?" A. "Heart." Q. "What are veins?" A. "Duck that returns the Blood to the heart." Q. "What office do they perform?" A. "return the arterial Blood to the heart." Q. "Name some of the veins of the face." A. "jugler and pulmanary." Q. Name the nerves which supply the face." A. "fifth." Q. Give their origin." A. "Cranium." Q. "What is physiology?" A. "a traties on the function of animal and vegetable life in a state of health." Q. "What is blood?" A. "a neutraeve flewed contan the nesessar ingredeing to build up wast tishues &c." Q. "Give the circulation of the blood." A. "arterial and venus." Q. What is therapeutics?" A. Pertaining to the healing art." Q. "What is medicine?" A. "substian use to produce special effects on the system." Q. "What

is a remedy?" A. producing a specian iffect on the system." Q. "What hereditray chronic diseases have the most marked effect?" A. "Siflis." Q. "How treat an exposed pulp?" A. "Kill the d—— thing."

The above examination was in writing; is now in the hands of the old members of the board, and can be seen by any one. We only give a portion of the examination, which is, however, so far given verbatim. This shows Wilkins ability—or rather the lack of it. Wikins is a notorius advertiser of the dodger kind.

The most astonishing thing, however, is the fact that although Wilkins failed to pass a creditable examination, by which he might be permitted to legally practice dentistry, he had the unmitigated gall to go to Judge Burke, of this city, and ask that he (Wilkins) be appointed a member of the Dental Examining Board — and what is more, he *did secure the appointment* and is *to-day* a member of the same board that was however, bound to refuse *him* a licence to practice. From Wilkins' cheek in this matter, we imagine if Saint Peter should deny him admittance through the pearly gates, that he would at once make application to the Lord for Peter's place long enough to slip through himself

This shows how much district judges know about dentristry or men competent to practice it. The same holds good in the appointment, by judges, of Medical Examining Boards, as it is nothing uncommon to find a member of a Medical Examining Board, who never saw a medical college. All Examining Boards should be selected by the profession who can rightly judge of the qualifications of the proposed members of the Board.— *Texas Health Journal.*

What's the Use of Quarantine?

A minister near Cincinnati thinks that this nation is favored of Providence, and that consequently there is no fear that cholera will visit us next year. The plague, he says, is sent to discipline mankind, and it begins therefore in the far East, where everybody is very bad, and scarcely one belongs to any of the Christian denominations. But "it is rare" he says, "that so dire a plague afflicts us, which proves that we are recipients of God's choicest blessings, and we should show that we appreciate them by becoming Christians." —*Review.*

Abstracts.

Barbaric Midwifery.

The surprising instance of the ease with which the women of the half-savage races recover from child-birth and its accidents is given in the *British Medical Journal.* A physician in British Honduras was called to see a coolie woman who had just given birth, and found her lying on the earth floor, having a child attached to the everted uterus by the umbilical cord and placenta. The "midwife" was " pulling and twisting at the uterus trying to remove it, thinking it was the after- birth. After having tied the cord, and peeled off the placenta from the uterus to which it was intimately adherent, and dashed the cleanest procurable warm water over womb, I succeeded, after some difficulty, in replacing it, and got the woman to her bed and bound her up. The next morning when I went to see my patient, she was in the yard feeding her fowls, and had no fever, pain, or after-trouble."—*Pacific Medical Journal.*

CHAUTAUQUA COUNTY HOSPITAL,
Dewittville, N. Y., July 18th, 1892.

The Pratt Medical Company, Binghamton, N. Y.:

Gentlemen:—I have recently used your Ichthyo-Mentholine in a case of hypertrophic rhinitis with pharyngitis, laryngitis and bronchical irritation with cough. It was a hospital patient and not a promising one for ordinary treatment, but under the use of your remedy the patient is now cured. I already had a good opinion of Pratt's Tonic in nerve and general debility, but I confess that I am agreeably surprised at the rapidly curative action of your Ichthyo-Mentholine in catarrhal diseases of the nose and throat

The beneficial and curative action of these remedies, is doubtless due to the successful compounding of pure and reliable drugs that successfully do all that you claim for them. I fear I am too lengthy, but your remedies afford the physician reliable preparations of known composition for the successful treatment of diseases, that heretofore the busy practitioner could not treat with success; and, if you continue to give reliable remedies as I find these to be, you will doubtless be very busy supplying the demand. as your preparation become more generally known to the medical fraternity.

Very truly yours,
T. C. WILSON, Attending Physician.

Every Physician in the World Should Read this Advertisement.

The Rip Van Winkle Reclining Rocker!

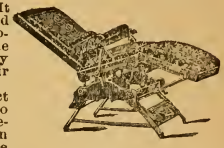
OFFICE AND GYNÆCOLOGICAL CHAIR COMBINED.

Special Inducements given to Physicians for a Limited Time. WRITE AT ONCE.

No. 1.

This is the most complete Physician's Chair ever offered to the profession. It combines a handsome leather-covered Office Chair and a first-class Gynæcological Chair, at less than one-half the price you would have to pay for any other first-class gynæcological chair alone.

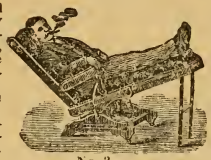
The chair is first-class in every respect and fully warranted. It has over two hundred changes of position; it is noiseless in all its movements; the back can be lowered or seat tilted at any angle desired, with full weight of patient thereon, with the utmost ease.



No. 2.

As a Gynæcological Chair it will take any position shown, or any intermediate position, besides having newly-patented improvements, which make it without doubt the best and cheapest Office and Gynæcological Chair in the World.

This chair can be converted from a splendid office chair (see cuts Nos 1 and 3) into one of the most complete Gynæcological chairs in one-half minute (see cuts Nos 2, 4 and 5).



No. 3.

This chair is sold with or without the Gynæcological attachment, as desired. It is unquestionably the most complete and comfortable reclining or lounging chair ever made. We make a special price to physicians, and also give them a handsome commission on all orders we receive through them for chairs for their patients. No chair in the world is so well adapted to ladies suffering from female weakness, and the commission we give on your orders will soon pay for your own chair.

SEND 2c. STAMP FOR SIX ELEGANT COLORED ENGRAVINGS.

No. 4.

Showing the chair in different positions and different styles of upholstering, etc.; also circulars containing splendid testimonials from nearly every State and Territory in the U. S.

REMEMBER,

This chair has nickle-plated attachments and adjustable stirrups. You cannot buy as fine a Gynæcological chair as this of any other reliable make for less than $70 or $100.

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The chair can be rigidly locked in any position. Physicians should order at once, as the special inducements we are offering only hold good for a limited time.

Manufactured by P. C. LEWIS MANUFACTURING CO.,

Box 229. CATSKILL, N. Y.

The World's Antipyretic, Analgesic and Anodyne.

EXCELLENT in all kinds of Headache. SAFE and SURE. Relieves Sciatica, Myalgia, Hemicrania, Typhoid Fever, and troubles due to irregularities of Menstruation. Works like a charm.

ANTIDOLOR

A GRAND SUBSITUTE FOR MORPHIA.

AN ENTIRELY NEW

COAL TAR DERIVATIVE.

Put up for Physiciaus in two forms—POWERED and 5 GR. TABLETS.

Samples of each sent on application.

Trade Supplied by United States and Canada Jobbers.

ANTIDOLOR CHEMICAL COMPANY, SPRINGFIELD, ILLINOIS.

PRICE, PER OUNCE, 75 CENTS.

Received, Read And "Refused".

To steal is dishonest, to cheat your fellowman is dishonest, to lie for gain is dishonest; yet there is another road to dishonesty equally as reprehensible as either of the above, viz: To receive and read a journal, for years, and then when called upon to pay for same, after having promised to do so, or even having acted in acquiescence with published requests to notify the journal if same was not wanted, to then go to the postmaster (without having nerve enough to write to the journal) and have him forward to the office a "refused" card, is as dishonest as stealing that much direct from the pocket of the propritors of such journal. In fact it is worse. It is a betrayal of confidence, is a sneaking, dirty and villianous trick of which no gentleman will be found guilty; and, any man who will do such a thing would steal from his grandmother's ghost. If a subscriber is not able to pay then that is quite another thing, and all such instances he should inform the proprietors of the publication, instead of having the P. M. mark on the cover of the journal "refused," and also send the proprietor a card marked "refused." All men who thus attempt to beat publishers should be held up to the public to be seen in their true light. This would be an unpleasant task, but we feel equal to the emergency. — *Texas Health Journal.*

New Medical Works Published in 1892.

Notwithstanding the impression that might naturally exist that a great many medical works were published in this country during 1892, the *Publisher's Weekly* states that there were 128 new works published on medicine and hygien in 1892, or 20 more than were published in 1891. In a graded list of ninteen classes of new books, medicine stands number thirteen; so it can not be said that physicians are exceedingly prolific bookmakers.

Dr. Paul Barringer, formerly of Davidson College, and since a professor in the University of Virginia, has been apsointed one of the board of health of that State. In view of the cholera possibly reaching this country the present summer, the appointment of this board of health was looked to with much interest in Virginia, and the compliment is a very high one to so young a physician as Dr. Barringer. This will be pleasant news to the many friends of the doctor.—*Charlotte News.*

THIS PAGE FOR SALE!

Dysmenorrhea and Leucorrhea Can be Relieved Entirely by the Use of Dioviburnia.

Dios Chemical Company, St. Louis, Mo., U. S. A.

UTERINE, TONIC AND ANTISPASMODIC.

St. Louis, June 18, 1888.

I have given the Dioviburnia a fair trial, and found it useful as an uterine tonic and antispasmodic, relieving the pains of dysmenorrhœa and regulator of the uterine functions. I feel authorized to give this recommendation of Dioviburnia, as it is neither a patented nor a secret medicine, the formula of which having been communicated freely to the medical profession.

L. Ch. Boisliniere, M. D.,
Professor Obstetrics, St. Louis Medical College.

DYSMENORRHEA, AMENORRHEA, AND EXCESSIVE LEUCORRHEA.

St. Louis, June 20, 1888.

I very cheerfully give my testimony to the virtues of a combination of vegetable remedies prepared by a well known and able pharmacist of this city and known as Dioviburnia, the component parts of which are known to any and all physicians who desire to know the same, and, therefore have no relation to patent or quack remedies. I have employed this medicine in cases of dysmenorrhœa, suppression of the catamenia, and in excessive leucorrhea, and have been much pleased with its use. I do not think its claims (as set forth in the circular accompanying it) to be at all excessive. I recommend its trial to all who are willing to trust to its efficacy, believing it will give satisfaction.

John B. Johnson,
Prof. Principles and Prac. of Medicine, St. Louis Med. College.

OF UNQUESTIONABLE BENEFIT IN DYSMENORRHEA.

St. Louis, June 23, 1888.

I have used Dioviburnia quite a number of times; sufficiently frequent to satisfy myself of its merits. It is of unquestionable benefit in painful dysmenorrhœa; it possesses antispasmodic properties which seem to be exerted especially on the uterus.

Dr. H. Tuholske,
Professor Clinical Surgery and Surgical Pathology, Missouri Medical College; also Professor of Surgery, Post-Graduate School.

CONGESTIVE DYSMENORRHEA.

St. Louis, June 18, 1888.

For more than a year I have prescribed Dioviburnia. In those cases that I have been able to follow up, I found that they derived much benefit from its use in almost every form of dysmenorrhœa —especially the congestive form. I am so pleased with this remedy that I now prescribe it almost daily.

T. L. PAXIM, M. D.,
Physician in Chief and Gynecologist to St. John's Hospital.

LEUCORRHEA.

Grand Island, Erie Co., N. Y., March 10, 1890.

Dios Chemical Co.—Dioviburnia is as near a specific in Leucorrhea as you can get. The ingredients are all good. The combination better. I used it in a case of Leucorrhea of long standing, and it did excellent work. I do not think it will disappoint any practitioner. I can recommend it. I gave it in dessertspoonful doses. I shall continue its use in such cases; as the formula is given, no physician need be afraid to try it, for it is no secret nostrum.

A. D. BROOKS, M. D.

Hartwell, Kearney Co., Neb., June 14, 1893.

Dios Chemical Co.—Dioviburnia ranks among the first-class preparations as A 1. A young lady, æt, 19 years, had been troubled five years with Dysmenorrhea and since the last three or four months with complicated Leucorrhea. I advised her to use Dioviburnia according to direction, and after having passed two of her periods in "good shape" (as she reported yesterday), she pronounced herself to be perfectly cured.

C. A. BRUEGMANN, M D.

Eminent Authority.

The late Dr. Thos. F. Wood expressed his views on Antiæostine by saying: It is undoubtedly a fine combination. The prospects for its future are bright and promising. This was when Antiæostine was in its infancy. To-day we can see the prudence and foresight of this great, eminent and beloved physician. Hundreds of physicians are now ready to testify to its merits, both at home and abroad. Every physician should send for a sample ounce. The company consign their goods and guarantee satisfaction. See their advertisement.

Composition of Syrup of Figs.

Because the California Fig Syrup Co. thought best to name their laxative compound the "Syrup of Figs," it does not follow that the active principle of the preparation is made from the fig. Instead of this being the case, they state freely to the profession that the laxative properties of the syrup are obtained from senna Hare states in his new work on Therapeutics that both Rutherford and Vignal assert that senna acts very materially in increasing the flow of bile. Hess says that the drug acts directly as a stimulant upon the mucous membrane, and so produces a local peristalsis as it is moved along. Hare recommends it especially in the treatment of the constipation of pregnancy. As an ingredient in the compound liquorice powder it is one of the oldest and best known drugs. Recognizing the sterling worth of this drug when employed in laxative doses, the California Fig Syrup Co has so combined it with other agents that it is both pleasant and effective. It might be called a family laxative, useful in all those cases where a freer action of the bowels is desired. The physician is often puzzled to know exactly what to prescribe when the only remedy indicated is something to increase peristaltic action. The therapeutics of senna warrants its recognition at once, while the palatibleness of the preparation points to Fig syrup as the best medium by which this drug can be administered.

It is interesting to note in this connection that the California Fig Syrup Co. has just received a decision from the United States Court of Appeals confirming their right to the exclusive use of the name "Syrup of Figs" or "Fig Syrup" applied to a laxative medicine.

Medical Association of Georgia.

The Forty-fourth Annual Session of the Medical Association of Georgia will be held in Americus on April 19th, 20th and 21st. President, A. A. Smith, M. D., Hawkinsville; Vice-President, Geo. J. Grimes, M. D., Columbus; Vice-President, Robt. H. Taylor, M. D., Griffin; Secretary, Dan. H. Howell, M. D., Atlanta; Treasurer, E. C. Goodrich, M. D., Augusta.

Dr. W. S. Kendall died recently at his home in Ansonville, Anson county, North Carolina.

ELIX IODO-BROMIDE OF CALCIUM COMP.

SYPHILIS — TUBERCULOSIS

DOSE FOR ADULTS ONE TEASPOONFUL IN A HALF WINEGLASS OF WATER THREE TIMES A DAY

It can be combined with Hydrarg. Bichloridum without precipitation or chemical change.

THE POSITIVE ALTERATIVE

It is a valuable adjuvant in the treatment of the Syphilitic Cachexia, Tubercular Conditions, and those diseases in which Alteratives are positively indicated. Each ounce contains seventy-two (72) grains of the salt.

SEND FOR BOOK OF TESTIMONIALS

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MALTOPEPSINE

DOSE 5 TO 15 GRAINS AFTER EACH MEAL

CONTAINS ALL THE DESIRABLE ELEMENTS FOR THE IMPROVEMENT OF DIGESTION AS WELL AS FOR THE RELIEF OF INDIGESTION, CONSTIPATION, VOMITING IN PREGNANCY & ALL CHOLERA INFANTUM, GASTRIC DERANGEMENTS

CONTAINS MALT, PEPSINE, LACTIC, MURIATIC AND PHOSPHORIC ACIDS &c.

IN POWDER OR ELIXIR · PREPARED ONLY BY

THE TILDEN COMPANY — BRANCH HOUSE ST. LOUIS, MO.

SAMPLES FURNISHED ON APPLICATION. NEW LEBANON, N.Y.

John C. Baker & Co's Standard Preparations.

BAKER'S EMULSION is prepared from the finest Cod Liver Oil in the world, and can be prescribed with assurance of the most satisfactory results.

Palatable. Bottles contain full 16 ounces.

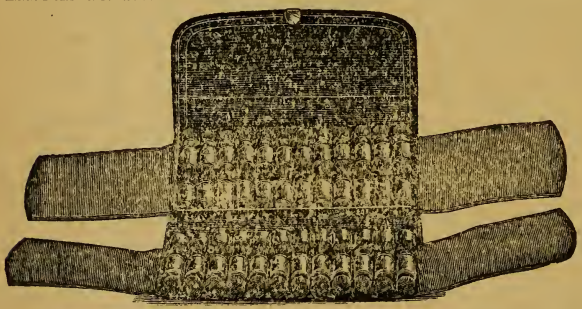
Of Druggists.

Established 1830.

Made in Winter in the Lofoten District of Norway and Imported in Sealed Cans. Always fresh and sweet.

JNO. C. BAKER & CO., 815 Filbert St., PHILAD'A.

Agents for { Solution Ferrous Malate. Ferrous Malate, Gentian and Cinchona. Solution Salicylate of Iron. Barlett's Pile Suppositories.



All vials in this case are fitted with screw-caps.

The INTERESTING Offer

of a handsome double morocco pocket medicine-case—7½x3¾x⅞ inches—containg 24 vials filled with a complete assortment of our popular Tablets ond triturates, at the special price of $3.00, has been

Accepted by Over 15,000 Physicians.

THE CASE CONTAINS

Acatanilid Comp. (Migraine).
Anti-Constipation (Mulford Co.)
Chlorodyne (Mulford Co.)
Viburnum Comp. (valuable uterine tonic.)
Ammonii Chloridum Comp.
Bismnth et Cereii Oxalat.
Bronchitis.
Cathartic, "Active."
Diarrhœa.
Ergotine (Bonjean's), 1 grain.
Ferri et Acid, Arsen, et Strych., No. 1.
Fever (Dr. T. G. Dovis).
Hydrarg. Chlor. Mite et Ipecac et Sodii Bicarb, No. 1
Hydrarg. Iod. Viride, 1-4 grain.
Morphinæ Sulphas 1-6 grain.
Neuralgic (Dr. H. J. Kenyon).
Nitro-Glycerin Comp. (Mulford Co.)
Pulv. Ipecac et Opii (U.S.P.) representing 2½ grains
Tinct. Aconiti, 1 minim.
Tonsilitis (Mulford Co).
Corros. Sublim, 1 grain (colored blue, antiseptic).
Quininæ Sulphat, 1 grain.
Hydrarg. Chlor. Mite, 1-10 grain.
Kermes Mineral Comp, (Dr. E. Wilson).

☞These cases are a permanent advertisement for us, as they are constantly being refilled with our standard preparations, which physicians use because they are so reliable, valuable, convenient and elegant—all compressed. We continue this attractive $3.00 offer for a limited period. Send check, money-order or postal note. We deliver it free of postage.

H. K. Mulford Company, 2132 Market Street, PHILADELPHIA.

The Section on Therapeutics of the Pan American Medical Congress.

Gentlemen who desire to read papers at this meeting should notify the undersigned at once of their intention, and should send him, by July 10th at the latest, an abstract of their paper in order that it may be translated into the three official languages of the Congress and published in the program. The importance of this section and the interesting papers which have already been promised, give assurance of a very successful meeting.

H. A. HARE, President of Section, Philadelphia, Pa.

Modern Uses of Pepsin.

In considering the therapy of Pepsin we too often limit its field of usefulness to the class of gastric ailments collectively recognized as "Dyspepsia" without realizing that in another field its utility is quite as emphatically marked.

Not wishing to weary our readers with an exhaustive resume of the bibliography of Pepsin in surgery, we will content ourselves with stating that this ferment can be most advantageously employed in diphtheria and in the local treatment of unhealthy ulcerated surfaces with exudation.

The solvent power of Pepsin on albuminous matter needs no substantiation; it is a fact.

Recognizing then the topical action of Pepsin on the diptheritic membrane, and recalling the fact that upon removal of this membrane the subjacent and inflated mucous membrane of the affected parts is exceedingly receptive of any germ-laden substance brought into contact with it, it behooves us as careful practitioners to avoid the use of any pepsin in which putrescible matter is in association with the ferment itself.

Until quite recently no Pepsin free from septic contamination was available, as none was manufactured.

Our attention has been called to Webber-Pepsin S. & D., which seems to present the ferment in the most active form yet attained, and as it is guaranteed to be free from mucous and easily putrescible matter, it is peculiarly adapted to this line of treatment.

Not only is it the most active pepsin ever introduced, but it is so perfectly soluble that it can be applied with a camel's hair pen-

cil, or in the form of spray, in a most concentrated solution, thus making it the most available Pepsin for this purpose.

We would therefore suggest to our readers the desirability of testing this Pepsin and reporting their results to some medical journal, as in no other way can the literature of this subject be substantially enriched.

We gladly offer the use of our columns for the discussion of any live topics which will be of interest to the profession generally. A reference to our advertising columns will repay the reader who desires to obtain samples for experimentation.

Beef, Wine and Iron with Extract of Malt.

A Nourishing Diet for Invalids and Convalescents.

As a simple and restorative food, where a tonic effect is desired, there is perhaps nothing in the whole line of tonic dietetics of so much real value as this preparation. It furnishes the diseased stomach with the power of assimilating amylaceous diet, and supplies ready assimilable food at the same time, in the article of Malt Extract. The iron salt enriches the red corpuscles that are in the blood, while to the nutrient effect of beef is added the stimulant effect of fine sherry wine. Each tablespoonful represents two grains of the soluble citrate of iron, and one ounce of finely chopped, raw, lean beef with equal quantities of our Improved Extract of Malt and Sherry wine. Price per pint, 60 cents; per gallon, $4.00.

Prepared by Norwich Pharmacal Company, Norwich, N. Y.

It is often necessary to resort to local artificial support to relieve weak or over-taxed organs, that every physician should know where he can find, for any emergency, what he needs in the line of elastic goods, such as bandages, trusses and abdominal supporters, and of a reliable quality. It has been our misfortune on more than one occasion to have an article coming from a so-callad reputable firm, go to pieces the first time it was applied, being absolutely rotten. Such accidents, however, have never been known to happen to any goods made by the Empire Manufacturing Company, Lockport, N. Y. They are always fresh, and made out of material of the best quality. When anything in this line is needed it would be well to bear in mind, and patronize a firm that always gives satisfaction.

Miscellaneous.

American Electro-Therapeutic Association.

EDITOR CHARLOTTE MEDICAL JOURNAL:

Dear Sir—At the second annual meeting of the American Electro-Therapeutic Association, the following officers were elected for the ensuing year:

President, Dr. Austin H. Goelet, No. 531 west Fifty-Seventh street, New York; First Vice-President, Dr. Wm. F. Hutchinson, Providence, R. I.; Second Vice-President, Dr. W. J. Herdman, Ann Arbor, Mich.; Secretary, Dr. Margaret A. Cleaves, 68 Madison avenue, New York; Treasurer, R. J. Nunn, 119 York street, Savannah, Ga.

The third annual meeting will be held in Chicago on September 12th, 13th and 14th, 1893. A cordial invitation is extended to all members of the profession interested in electro-therapeutics. Arrangements for special rates on railways and at hotels are in progress. The Committee of Arrangements will be obliged if those who intend being present at the meeting will send their names, the class and amount of accommodation required, titles of papers to be presented, applications for membership, etc., at as early a date as possible. Accommodation should be secured early, on account of the crowded condition of the hotels, because of the World's Fair. All communications should be addressed to the secretary.

The committee will be glad to furnish any information in regard to the meeting upon application.

THE COMMITTEE OF ARRANGEMENTS.

S. C. Staunton, Sec'y; Franklin H. Martin, Chm.

Prophylaxis Against Syphilis.

Dr. Osler makes the following statement in his work on the "Practice of medicine," which recently appeared: Personal purity is the prophylaxis which we, as physicians, are bound to advocate. Continence may be a hard condition (to some harder than others) but it can be borne, and it is our duty to urge this lesson upon young and old who seek our advice in matters sexual. Certainly it is better as St. Paul says, to marry than to burn, but if the

former is not feasible, there are other alters than those of Venus upon which a young man may light fires. He may practice at least one of the five means by which, as the physician Rondibiles counselled Panurge, carnal concupiscence may be cooled and quelled —hard work of body or hard work of mind. Idleness is the mother of lechery, and a young man will find that absorption in any pursuit will do more to cool passion, which, though natural and proper, cannot in the exigencies of our civilization always obtain natural and proper gratification.—*Weekly Medical Review.*

Rules for Passing the Sound.

1. Place the patient in the reclining posture, and make the flexures described—at least flex the thighs.

2. Lubricate ihe urethra by injecting alboline, or some refined oil; if the oil is not cocainized and it is desirable to use cocaine, it should be first applied.

3. Make the urethra tense by traction.

4. Avoid force; go slow; be patient.

5. Guide the instrument if obstructed in the deep urethra, by the finger introduced into the rectum.

6. All instruments are to be made surgically clean and perfectly smooth.

Cone, Michigan, Feb. 2d, 1893.

Detroit Pharmacal Company, Detroit, Michigan.

Gentlemen: — I wish to report result of samples kindly sent by you some time ago. Of the Apodyna, I found as follows: As an analgesic, I gave four grains every hour for four or five hours, or until relief was obtained. In most cases four doses was sufficient to relieve the pains as neuralgia and rheumatism, that is, relief was obtained in seven cases in nine. At no time did I hear the least complaint of any unpleasant symptoms. In the headaches of women, it is I may say, a specific, as I did not fail in any case to relieve my patients permanently. I am sure it is the peer of any thing in its line and hereafter I shall never be without it in my case. I feel it my duty to make this report "for the public good."

Very respectfully, Mont H. Cassiday, M. D.

Dr. A. Currie died not long since at his home near Antioch, N. C. He was forty-five years of age.

Charlotte Medical Journal.

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Original Communications.

Summer Complaint.

BY ANNIE L. ALEXANDER, M. D., 416 N. TRYON STREET, CHARLOTTE, N. C.

The term is comprehensive. The symptoms and etiology are so varied and numerous that the disease may be considered as a group of diseases rather than one.

There are other diseases of which diarrhœa is a symptom and must be differentiated from the disease under consideration. It is frequently present in typhoid fever, tuberculosis, septicæmia, malaria and diphtheritic diseases of the intestines.

The French writers describe several varieties of diarrhœa. Rostan describes fourteen. All forms of the disease in children may be classified into three varieties: simple non-inflammatory diarrhœa, inflammatory diarrhœa, or enterocolitis, and cholera infantum. Agencies which have no effect in the adult will frequently increase the number of evacuations in young children. Food which is not easily digested, some of which ferments, stimulates peristalsis, produces diarrhœ. Over-foeding and too frequent is a cause especially in young infants who do not vomit the surplus amount. When the food is not digested and assimilated, remaining in the alimentary canal, it acts as an irritant, producing numerous and unhealthy evacuations. The mother's milk, or that of the wet nurse, may disagree from known or unknown causes. Exposure to cold is often the cause of an attack of diarrhœa. In some children teething is accompanied by a relaxed state of bowels, diarrhœa resulting. This disease, especially entero colitis and cholera infantum, is more prevalent during the summer months, beginning in May and abating when the cool weather comes on in November. The heat of summer generates noxious products which contaminates food, air, and water, causing the fearful epidemics among the

young children in our large cities. In the poorer quarters the conditions are present which render this disease so fearful; bad food, over-crowding, foul air, poisonous gases, uncleanliness. The micro-organisms thus generated enter into the food and water, and gain an entrance into the little victims. These micro-organisms induce various fermentative processes. Two general classes may be distinguished by the odor of the stools, and these two correspond to the two great classes of foods, hydrocarbons and carbohydrates. The fermentations of the hydrocarbons yield putrid or odorless products, while the carbohydrates yield acids and gases.

The alimentary canal in infants is well supplied with lymphoid tissue which is eminently absorptive in its function. In healthy infants this is necessary for its growth, but when poisons resulting from these fermentative processes are prssent it becomes a port through which disease attacks the little ones. This lymphoid tissue becomes swollen, inflamed, ulcerated, the ulceration extending into the intestinal wall and even perforating the peritoneal coat. These changes are slow but progressive. Those cases which terminate fatally in twenty-four to forty-eight hours, as cholera infantum, show no changes in the intestine more than a slight abrasion in the epithelial surfaces. Extensive ulceration results only after two and-a-half or three weeks duration of the disease.

The symptoms are those refering to the alimentary canal, nervous system and kidneys. There may be prodromic symptoms, as restlessness, vomiting, abdominal pains, or the disease may begin abruptly. The stools differ in color and consistency in different cases and at different times in the same case. The stools of young infants are frequently green in health. I have seen these greenish stools continue from the age of one week until the child was three or four months old and the child grow nicely and appear perfectly well.

Coagulated casein appears in the discharges of the nursing and bottle fed baby, particles of undigested food in that of older children. The actions become more frequent. Usually the evacuations are easy, but if acid or irritating there is more or less tenderness. In many cases of the non-inflammatory form there is no constitutional disturbance. If the disease goes on unchecked for days, the stools increase in number, become more watery, the little patient becomes thirsty, restless, feverish, tongue furried, face pale, tissues flabby

and emaciation takes place rapidly. Usually before these symptoms become so pronounced the disease has passed into the inflammatory variety, or entero colitis, which is one of the most common and fatal of infantile diseases. Entero colitis may begin with lassitude, fretfulness, febrile movement, soon followed by diarrhœa and vomiting. The first evacuations resemble those of simple diarrhœa. They may be green, or yellow when first passed and become green on exposure to air; they may contain coagulated casein (putty like matter) particles of undigested food; mucus, with or without blood, is present in the later stages, showing a predominence of trouble in the colon. Abdominal tenderness and tympanites are present. Vomiting may be an early symptom from acid fermentation in the stomach; coming on later it may be reflex from spurious hydrocephalous or from impaired function of the kidneys not eliminating the urea from the system. The pulse is accelerated, temperature elevated, skin dry, actions of kidneys impaired. The tongue is covered with a light moist fur, is often dry, buccal surface unusually red, gums swollen and sometimes ulcerated.

Cholera infantum is characterized by its sudden onset, large and frequent watery discharges, persistent vomiting, great elevation of temperature, rapid and great emaciation, and profound nervous symptoms.

Those symptoms referring to the nervous system in this group of diseases are depression, wakefulness or drowsiness, coma, convulsions and fever; and in cholera infantum there is a condition of shock not present in the other two. The treatment is preventive and therapeutic.

Attention to the diet is the most important matter. The most common fault is too frequent feeding, especially of breast fed babies. Every time the child frets or cries it is nursed, when it is thirsty, and a drink of cool water would quiet it. Feeding a child every half hour or every hour is certain to cause gastro intestinal irritation. Feed the babies at regular intervals, give them plenty of pure cool water; during the heated term two or three sponge baths daily should be given. Infants should be guarded against sudden changes of temperature. They are dressed lightly and when sudden changes come the surface is chilled and diarrhœa or cholera

infantum results. Light weight flannel underwear should be worn especially by children predisposed to bowel troubles.

In a case of simple diarrhœa clearing the bowel of the offending material and regulating the diet is usually all that is needed with perhaps a few doses of paragoric. To remove the intestinal contents I give calomel in four half grain doses repeated at intervals of three hours, to a child of eighteen months and under; it may be necessary to follow this with a dose of the well honored remedy castor oil. If we suspect that the bowel has not been thoroughly cleansed, use large enemata of warm water. For a few days use some such preparation as

℞. Hydrag. Chlor. Mite grj.
Bismuth. Subnit,
Lactopeptine, aa ʒii
M. et. fb. chart. No. xxiv.
Sig. One after each feeding.

Entero colitis being caused by fermentative processes and micro-organisms entering the intestinal tract through water and food, our attention is turned in that direction. The treatment consists in removing the intestinal contents, attention to the diet, administration of intestinal antiseptics and combatting special symptoms. Some physicians prefer castor oil, but I get better results from calomel as a purgative in these cases. Wash out the bowel thoroughly with warm sterilized water, or a saturated solution of boracic acid. After thus washing the bowel, removing the micro-organisms as nearly as possible, medicine may be applied directly to the ulcerated surfaces in the form of small enemata of an emulsion of bismuth subnitrate or a solution of nitrate of silver 10 gr. to the oz., followed by an alkaline solution. If the actions are putrid or foul smelling we know it is a hydrocarbon product. The indications are clear; change the diet to a non-nitrogenous one, as nearly as possible; arrow root is one of the best, rice and crackers are good. In some cases the stools are odorless, but we recognize the poisons resulting from proteid foods, ptomaines and toxalbunims from the systemic symptoms. With this clearing the bowel and change of diet in twenty-four or thirty six hours we note a change in the evacuations and an improvement in the general symptoms. If the baby is being fed on carbohydrate food with acid and may be frothy dischrrges showing gas; do not change to a proteid diet for that will only make matters worse. Withhold

all food for twenty-four or even forty-eight hours, the strength being kept up with champagne, brandy or blackberry wine. It is impossible to sterilize the bowel, but having removed, and prohibited the injecion of that on which the micro organism thrive, we have the alimentary canal in a condition to administer those remedies known to be antiseptic. Cupric arsenite is a favorite remedy with me. For an infant six months and under I order one tablet $\frac{1}{100}$ grain to be dissolved in a glass of water and a teaspoonful to be given every half-hour for twelve hours, then every hour, gradually increasing the intervals. For older children, larger doses in proportion. Bismuth subintrate is one of the best antiseptics we have, its astringent qualities will check the too frequent evacuations and where that is not desired it is well to combine it with calomel, which is an excellent antiseptic, the bismuth counterbalancing the laxative effect. A good combination is

℞. Hydrarg chlor mite grj.
Bismuth Subnit, ʒj.
M. et. Div. chart No. Xii.
Sig, One every three hours.

In listerine we find another antiseptic valuable in the treatment of this disease. Ten to twenty drops every four hours. The principal lesions being in the color, makes it possible to use water as an antiseptic in washing away the germs.

Stimulants are indicated, whiskey is the best. In the acid forms of the trouble where there is no systemic poisoning, opium may be administered cautiously.

In cholera infantum, opium given cautiously is the sheet anchor.

The disordered sympathetic nervous system, the vaso motor nerves bordering on paralysis, permitting the transudations of serum into the alimentary tract, these conditions are best combatted with opium, preferably in the form of morphine $\frac{1}{100}$ to $\frac{1}{60}$ grains, given in a teaspoonful of cold water every time the child vomits, will soon control the vomiting and the profuse watery discharges. In these minute doses we can safely give it, watching carefully its effects. Opium is condemmed by some of the best practitioners in the treatment of summer complaint. Where is the doctor who does not give morphine in cholera mobus in the adult? The two diseases are similar and why not the treatment?

A Few Thoughts in Reference to the Treatment of Summer Diarrhœa in Children.

E. C. REGISTER, M. D., CHARLOTTE, N. C.

No subject is more important or should be given a more careful consideration, especially at this time of the year, than that of infantile intestinal disorders. A study of the causes of death in our cities during the Summer months show that this class of diseases prevail more extensively and proves more fatal than any other complaint. With our improved methods of prevention, we have in the last ten years lessened the death rate fully twenty-five per-cent. and if we could impress upon the mothers and even the physicians the great amount of good that could be accomplished by the strict adherence to the many valuable sanitary rules that we have at our disposal, we would still lessen the death rate. We are all familiar with the fact that, at the present time, the tendency among our most prominent microscopist and investigators of disease, is to solve the great problem, how to overcome or to check the activity of the bacillus. This is probably natural, but we, in the interest of everything tending to promote us professionally and in the interest of our most helpless sufferers, should attack with the same energy the causes of this class of diseases that prevails among the little innocent children, as we do those that invade us at a more mature age. In order for us to apply intelligently the many preventative and curative measures at our disposal we should study a few of the most common causes producing Summer Complaint and their way of development. I believe that the prevailing opinion is correct, that fermentation is probably the most common source of mischief at this critical time of the child's life in Summer. In addition to the many causes of fermentation in individuals of mature years, children unfortunately are subjected to additional causes. Their organs of digestion, anatomically and physiologically favors the production of fermentation more than in those of adult life.

At this time of life a child's stomach could hardly be considered a muscular structure and its relative size is much smaller than that of adults. Therefore the peristaltic action that is considered such a valuable aid in digestion of adults, is almost entirely wanting in the child. Their digestive juices are not so uniform in strength or quality and are not so apt to meet the requirements of digestion

as they are in after years, when the glands that produce them are fully developed. It is generally believed that it is the insufficient quantity of acid, at times, in the gastric juice that has a tendency to produce bacterial fermentation, that fermentation is more apt to develop in an alkaline than an acid medium and that so long as the juices of the stomach are normal, fermentative changes are not likely to begin. Another and no doubt a very frequent cause is the incorrect quantity of milk needed at the different ages of the child. I have no doubt that if the question was put to the physicians of this city, and I beleive all of them are well informed men, as to the proper quantity of milk a child needed at a certain age, there would be considerable difference in their opinions. Judging from the small and vague amount of literature on this particular point and the extent of the difference in opinion among eminent writers, a conclusion is easily reached, that we have not given it the amount of study that is properly due it and that we do not in response to enquiries from mothers and nurses on this point give an opinion that is every time correct or is much better than the mother's own judgment. An every day occurrence that we are all familar with is that of seeing mothers nurse their children and give them the bottle to keep them from crying. You may say that this is commonplace and is something that was written about hundreds of years ago. This is probably so, but we allow it to go on every day, not corrected and the fact is that we in this particular neglect an important duty and thousands of ill results spring from it. I believe that nine-tenths of the hand fed children that have come under my observation have suffered first or last in being over fed. I have seen children crying, evidently from coliky pains, due to too large a quantity of milk on their stomachs, more than they could possibly digest properly and yet they would seize the bottle and take more just as if they were starving. Mothers not knowing the amount of mischief they are likely to produce take advantage of this unnatural or I might say diseased condition of the child's appetite and keeps giving the little sufferer more milk, thinking after a while they will satisfy it. This overloaded condition of the stomach is kept up day after day and the natural result is a case of diarrhoea. The next cause that we will consider and is by far the hardest to understand is that part that germs play in the production of diarrhoea. Every physician with expe-

rience has seen the great depression that so soon manifests itself in cholera infantum and knows that he has to deal with a poison or something more than an ordinary derangement of the bowels. Milk, if left alone as everybody knows, will soon ferment or turn sour, this is through the agency of a microbe, and Pasteur, as early as 1867, believed that a close relationship existed between fermentation and infection. This belief at the present day is strongly fixed in the minds of a great many eminent physicians but just the character of the germ or germs that are present in fermentation and how they cause diarrhoea is not as clearly known as we would like to have it. The majority of the writers on this subject are of opinion that it is the poisonous product of many different varieties of germs. Probably the most effective way in preventing fermentation is by sterilization of the milk, and I find that the nurses of this city are very proficient and skilled in this particular. Up to a few years ago a great many preparations of predigested foods were very extensively used in every case of deranged digestion, but at the present time, when an artificial food is needed, it is generally sterilized cow's milk that is used and I believe it is the proper thing to do, although it is not in accord with the views of a great many. After removing the irritating substances from the alimentary canal by giving a good dose of castor oil, salts, rhubarb or by a plan that is often resorted to and is very popular with some is by giving copious injections.

If this latter plan is adopted, a large amount of water should be used, so that the entire large bowel can be thoroughly reached. The water that is used should be previously boiled, and some authors suggest that it should contain Naphthol, five grains to the half-quart, others prefer salicylate of sodium, I usually add a little chloride of sodium as it is always convenient and I believe meets every indication. I find that the antiparasitic and antifermentative remedies are productive of the best results. Among the drugs that have been most extensively used for the greatest length of time and that have the largest number of advocates at the present time are the mercurials. They were favorite remedies in the treatment of this class of diseases as long ago as the history on the subject carries us. Dr. Collins, of New York, has this to say of the mercurial treatment of infantile diarrhœa: "They have a marked action on the great furnace, the liver, in which oxidation goes on with great-

er vigor than in any other part of the body, to stir it up as it were, to stimulate it to renewed activity, to remove the cinders and partially burned products that are clogging it up and allow it to do its work so thoroughly that toxic products, if they do form, will be oxidized into substances quite harmless." Another reason is on account of their antiseptic qualities. Recognizing as we do the parisitic theory, the ptomaines, and the fermentative changes that produce and maintain infantile diarrhoea, coupled with the clinical results, would naturally find us administering antiseptic remedies.

The only other remedy that I will consider and is second only to the mercurials in popularity is that of salol.

This is comparitively a new medicine, only been in use a few years, but it has become and deservedly so, a very popular remedy in this class of diseases. Its therapeutic effects are dependent entirely upon its power to disinfect so far as it is possible the alimentary canal. The theories concerning it a few years ago in reference to its insolubility by the gastric juices and that it was only soluble after the addition of the pancreatic juice, has been substantially confirmed by a great many of our eminent physiologists. In salol we have a disinfectant that we can use freely without danger, that is not changed until it enters the intestines and that has shown itself to be therapeutically what you would naturally expect, viewing it from a physiological standpoint.

Other medicines, of course, are occasionally essential in the proper management of a case of infantile diarrhoea. My object in writing this paper was not to go through the many old familiar routine, yet valuable principles that are laid down in the text books, but to give a few ideas in reference to what I may, probably incorrectly call, specific treatment.

Lithectasy Successfully Performed.

BY W. E. FITCH, M. D., GRAHAM, N. C.

On February 26th, 1893, I was hurriedly summoned to see Mrs. ——. In a short while I was at her bed side and she gave the following history: Aged 32, married, had never been pregnant, apparently in good health, but was suffering very excruciating pain in her abdomen. On examination I found lower abdomen greatly distended. On questioning I found she had not passed

urine in about thirty hours. Feeling that I had a case of retention of urine, I at once took a female silver catheter from my pocket case and introduced it into the meatus urinaris, and after inserting it for three-fourths of an inch it suddenly stopped, with a grating clinking sensation to my hand. I at once thought of stone and withdrew my catheter, and with a probe pointed sound I carefully examined the obstruction to my satisfaction. Then I told patient she had retention of urine caused by stone which had lodged in her urethra, and I advised lithectasy, which she accepted. I did not think it advisable to give an anesthetic, so I administered a hypodermic of sulph. morphia, $\frac{1}{4}$ gr. with atropia sulph. $\frac{1}{100}$ gr. Gave her four ounces rye whiskey ; waited ten minutes, and began the simple dilitation of the urethra. Not having an instrument for the purpose, and not a believer in the slow action of sponge tents, for fear her bladder might rupture, I anointed my right index finger with carbolized oil, and trying to introduce my finger into her urethra, I proceeded very slowly and carefully, and without much difficulty I succeeded in dilating the urethra down to the calculus. Then with a stout pair of (Tieman's) bullet forceps I cleverly caught and removed a calculus about the size of an ordinary chestnut. It weighed 2.2680 grammes. It was oval shaped, somewhat compressed and flattened, smooth on the surface and of a fawn color. On section it was seen to be laminated and to present various shades of light brown or fawn tint.

It is needless to say that she passed a large quantity of urine, which like a deluge came. When the obstruction was removed, from its appearance, color, &c., I thought it was a uric acid calculus. Next day I dropped a fragment of the stone in a solution of caustic potash and applied heat. No ammonia was evolved and the fragment dissolved, proving that it was of uric acid fermentation.

My patient did not suffer very great pain during the operation, and the next day when I called to see her found her attending to her usual household duties.

I think when the stone is small enough, that is no larger than a partridge's egg, that the simple operation of dilating the urethra far preferable to lithotomy or lithority. These different operations can be employed indiscriminately, but each one is especially adapted to certain kinds of calculus.

Some Uncommon Causes of Insomnia.

By Joseph Collins, M. D., of New York, Visiting Physician to the Hospital for Nervous Diseases, Blackwell's Island, Nurologist to the Demilt Dispensary.

(*A Clinical Lecture Delivered at the N. Y. Post Graduate School.*)

Gentlemen :—To-day I shall consider with you some of the rarer causes of insomnia and the relief of this distressing symptom. Sleeplessness is often a very simple matter and receives but little attention from the physician, but if it is continuous there is no single condition that heralds with so much certainty imminent impending disaster, both to the mind and to the body. When patients come to us complaining that night after night they retire only to toss and suffer for hours before they can entice morpheus to soothe them, we know that a continuance of this state of affairs will result in impoverishment of the blood, accompanied by the long train of symptoms that it entails. Thus a vicious circle is produced, the sleeplessness producing bodily depravity and this, in turn, resulting in insomnia. It therefore behooves us not to look askance at this symptom, but to investigate it and treat it as if it were a disease.

The first case which I have to show you will, I hope, impress upon you the necessity of dilligently searching for the cause of insomnia in these cases. This lady is of a good American family and 47 years of age. She tells us that she has always had exceptionally good health. She is married and has a grown up family. Her family relations and financial status are the source of no worry or anxiety to her and she can give no reason for the possession of the trouble for which she seeks our aid. For more than a year past she informs us that she has been a sufferer from insomnia to such an extent that it had become absolutely unbearable. This condition persisted up until two weeks ago, when she first presented herself to this clinic. It is for the purpose of pointing out to you the great improvement that has resulted from the treatment employed that I present her. As you see she is a woman whom you perceive at a glance to be illy nourished and anaemic, but these are not the results of improper food or the absence of a good appetite for both of these she has in abundance. These conditions have resulted in part from lack of "natures sweet restored, balmy sleep."

When insomnia first became troublesome, more than a year ago, she removed her home from the city into the country thinking that the change and quietness would contribute to better rest, but this was of no avail. Then she began to consult one physician after another, remaining with each long enough to have her credulity, or the temporary efficacy of the prescribed doses exhausted and then passed on to another. So it was that far the doctors, herbalists and clairvoyants had their turn.

It is needless for me to enter into detail concerning the picture of her sleeplessness. It did not differ materially from the ordinary case. Her habit was to retire about ten o'clock, sometimes occupying a warm and then again a cold room. Sometimes attempting to read herself to sleep, then again tempting drowsiness by repeating wearying lines, but almost always she would hear the clock strike the early hours of morning before slumber finally came. Of course this soon resulted in weariness and peevishness during the day and rapid loss of strength and enjoyment of life.

In searching for the cause of the insomnia my attention was attracted particularly by one or two points in her history which it may be well to emphasize. The first of these was that often at night she was troubled with cramps in the legs and a second was that it was not uncommon for her to arise once or twice at night to urinate. I likewise noticed that when she first came in her face and ears were quite pale, but after a time they began to color very deeply. Now the first of these, viz.: cramps in the legs indicate to my mind, with a good deal of certainty, one condition and that is defect in the circulation. Not but what cramps may not occur without any particular perversion of the blood supply; but in nine cases out of ten I believe them to be dependent upon the cause that I have just stated. This is unquestionably the explanation of the troublesome cramps for which we are often consulted by elderly people and those suffering from insomnia. The agonizing cramps of Asiatic cholera are likewise dependent on thickening of the blood and resulting deficiency in its circulation.

The second point, increase in the amount of urine, particularly of a light color and low specific gravity, should always arouse your attention as to the condition of the vascular system, not alone in the kidneys but throughout the body. Of course such a condition of the urine may result from many causes. We often see it in a

person who has been subject to prolonged mental strain, worry, anxiety and the like. It occurs typically after an attack of hysteria and other neuroses, such as neurasthenia. But in these it is transitory and of little moment. Occurring as it has in this case, however, it points with some conclusiveness to changes of a degenerative nature in the blood vessels. On detecting such a condition one at once examines the urine chemically and microscopically and if you find it free from albumin or sugar and casts you can be reasonably sure that you have a disease of the vascular system which is gradually becoming known to the profession, as arteriorernal disease to deal with. This condition has been described under various names and several theories have been promulgated to explain its cause and the dependence of the symptoms, but that need not concern us here. One point, however, which I should like to mention in this connection is that you often see it stated in such conditions of the vascular system as I have been considering that there is an increase in the amount of urea. This, I am convinced, is not a fact. Certainly on account of the proportionately large amount of water it is relatively diminished; but I believe it to be diminished totally as well.

The third point to which I have referred, viz: the morbid flushings, I have learned to place a considerable reliance upon, as suggesting the stapability of the blood vessels, and particularly their dilatability and elasticity. These attacks of flushing do not appear, as a rule, while exercising or from exertion or emotion, on the contrary, paleness is more common then; they are more liable to occur after effort, when the tension has been taken off the blood and the small arterials are given time to dilate. The loss of elasticity is one of the first results of this slow arterial regeneration. They do not, for a considerable time, regain their normal caliber after having dilated.

You will see, therefore, that I am inclined to attribute this patient's sleeplessness to a degeneration of the blood vessels all over the body, but making its sinister effects particularly manifest in the brain. This is neither time nor place to open a discussion on the physiology of sleep. You doubtless are cognizant of the war that was waged for so long as to whether sleep was caused by anæmia or hyperæmia of the brain. We can safely say to-day that neither of these conditions are responsible for the occurrence

of sleep. A diminution of the amount of blood in the brain, however, is one of the results of sleep.

Here, then, is the explanation of the insomnia in this patient. Because of the diseased blood vessels and the resulting high arterial tension the protoplasm of the gray substance is kept in a state of excitation after the patient has retired. Ordinarily everything at this time contributes to markedly lower blood pressure. The non-dilatability of the patient's blood-vessels in this case prevents that. Then, after a time, when this dilation does occur, the loss of elasticity interferes with them in regaining their normal caliber and the result is there is a larger amount of blood in the brain relatively than there should be.

I will ask the patient to pass around, so that some of you may have an opportunity of observing the pulse now after the patient has been under treatment and comparing it with the sphygmographic tracing which I show you here. You will observe that while now her pulse is somewhat slow, resembling the so-called *pulsus tardus*, it has lost the high tension which this tracing shows so well. The treatment which this woman received, and which I am happy to say has been productive of such good results, has been rather limited, for I was anxious to test the efficacy of the one drug alone which seemed to me to be indicated, viz: nitroglycerine. When she first came to the clinic I put her on this drug in $\frac{1}{200}$ grain doses three times daily. She returned in two days without any particular improvement, and inquiry revealed that the physiological action of the drug had not been obtained. I therefore doubled the dose, that is $\frac{1}{100}$ of a grain three times daily, and likewise recommended the use of a foot warmer to be placed in bed on retiring. The results have been most gratifying. As she will tell you, she has slept from six to seven hours, besides a nap in the afternoon every day since this treatment. Of course we have not since neglected to look after her general condition and have taken the proper means to build up her general health. If there be any one factor more potent than another in the causation of arterio-renal disease, I believe it to be disorders of digestion, and these disorders merit our most careful attention. We shall therefore continue the administration of the glononi occasionally for some time yet, and in the meantime continue to improve her digestion and general nutrition. To keep the intes-

tinal canal in a proper, wholesome condition, I seriously advocate the use of pure water in generous quantities. It removes impurities in the shape of nitrogenous crystalizable matter from the alimentary canal, it flushes the kidneys and contributes to favor elimination from the other emunctories. A mild chalybeate water, such for instance as I shall give to this patient, in the shape of Highland water, combines the virtues of being pure and containing small amounts of iron.

I should like to say one word further in reference to the dose of nitro-glycerine. In most of the books you will find it stated as $\frac{1}{200}$ of a grain. This dose I believe to be too small, except the patient has a most susceptible influence for it. I have frequently tried it in $\frac{1}{200}$ grain doses on myself and various members of my class of medical students without getting any physiological effects, and $\frac{1}{75}$ of a grain in my own person is but sufficient to cause only disagreeable feelings of tension, beating and fullness of the head. Although I shall not recommend you to begin with the larger doses, I should like to urge upon you the necessity of giving in sufficient quantities to make its effects manifest in such cases where the indications for its use are clearly indicated. There are other drugs which perhaps we might have used in this case with good effect. For instance, the bromides have an analagous effect on the circulation to glononi, but in a much more limited way. The results of their continuous use are so often distressing that it is best to obviate their administratian when possible. As for any of the many hypnotics, both new and old, the patient herself stipulated that none of them should be used, as she had given them a sufficient trial and feared becoming subject to their influence, and although some of the more recent ones, such as Sulfonal, Chloralamid and Arional, are rarely responsible for the habit, still a craving for their use and efficacy does occur. Then their administration, not being aimed at the removal of the cause of the symptom, is not the proper plan.

A consideration of the other cases which I had intended to speak about, I shall have to defer.

One hundred and ninety students graduated from the University of Louisville in March. The class valedictory was read by Jno. Alfred Bodine, of Kentucky.

Iodide of Strontium in Cardiac and Other Affections.

BY DRS. LABORDE & MALBEC.

(*Translated from the Tribune Medicale 15th Dec. 1892.*)

The clinical application of Iodide of Strontium has been retarded on account of the extreme difficulty which was first experienced in procuring a chemically pure and at the same time a stable salt.

The facility with which commercial Iodides give up their Iodine, and the frequent presence of the toxic Iodate, has on more than one occasion been commented upon at the French Academy of Medicine, and it has been found necessary to issue a caution against the Strontium Iodide in any other than the crystalized form.

The most practical mode of manufacture is to decompose a solution of Iodide of Iron by Sulphide of Strontium. The resulting solution is rapidly filtered in an atmosphere deprived of oxygen, and the Sulphide of Iron separated; the solution of Iodide of Strontium is then evaporated, crystalized and recrystalized several times, in order to obtain a perfectly pure salt, unchanged by the action of the air and light.

Iodide of Strontium crystalizes in hexagonal tables containing six molecules of water.

The question of absolute purity is very important, otherwise it rapidly decomposes, when exposed to the air.

The problem of producing a stable and crystalized salt, without which exact physiological observation was hitherto impossible, has been solved by Paraf-Javal. From the investigations reported to the Biological Society, May 28th, 1892, it was shown that the action of Iodide of Strontium on the circulation of animals is similar to that of Iodide of Potassium.

Practical clinical experience with Strontium Iodide (Paraf-Javal), has fully confirmed the supposition that the Iodide of Strontium would present the same advantage over the Potassium salt as its Bromide analogue, and a series of observations was undertaken by one of us, on account of the non-poisonous character of the salt as compared with Potassium Iodide.

Observation 1. A lady *æt.* 50, with chronic endocarditis, and an enfeebled action of the heart, suffered from considerable dyspnœa together with symptoms of angina pectoris. The patient was treated for some time with Iodide of Potassium which gave consid-

erable relief, but she was unable to continue its use any longer on account of the gastric-irritation to which it gave rise. The *standard solution of Strontium Iodide*, (30 grains to the ounce) was therefore substituted, beginning with one tablespoonful, subsequently increased to two tablespoonfuls daily. The change proved eminently satisfactory, and within twenty-four hours a marked improvement in the symptoms was observed and the amelioration was maintained by its continued use.

Observation 2. A young professor affected with a cardio-pulmonary affection, characterized symptomatically by attacks of depression at times, taking the form of angina pectoris with a state of incomplete syncope. The heart presented signs of chronic endocarditis with a predominant determination on the left side of auriculo ventricular orifices, which is the seat of an *insufficiency* shown by a rude *souffle* subsisting at the left and at the point of normal *bruit*, as well as by a marked systolic tendency of the radial pul sations.

The patient had been benefitted by Iodide of Potassium, but was unable to continue its use, even in small doses of from 15 to 20 grains daily, without gastric derangements, which prevented the proper functions of digestion and alimentation. He was very weak, discouraged, and a prey to attacks of præcordial agony. A tablespoonful of the *standard solution of Iodide of Strontium* was administered, and increased later to a tablespoonful and a half daily. The effect was most remarkable and in a few days he was able to resume his occupation and gradually the functional phenomena to which he was subject disappeared, the nutritive functions improved and a fair condition of health is now established.

Observation 3. Our patient is a talented artist aged 50 years, who has suffered for a long time with an endocarditis, localized on the left side of the heart, and of the auriculo ventricular orifice with arterio-sclerosis and a complication with considerable gastric ectasis, and rebellious dyspeptic conditions. He is subject to attacks of depression which recently have become of extreme gravity and which affect his respiration, causing a loss of consciousness, and a fear of death. Small doses of Iodide of Potassium had previously helped him, but had to be abandoned. A tablespoonful of Iodide of Strontium solution was prescribed, and after the third day there was considerable improvement of the

cardiac functions and the dose was increased to two tablespoonfuls daily, this was continued for a month; the attacks of oppression and præcordial agony had disappeared, and there was considerable improvement in nutrition.

Observation 4. The patient is a powerful man of 40 years old, who is subject to frequent attacks of neuro-muscular rheumatism which manifested themselves on the heart by phenomena of pain, dyspnœa, and præcordial oppression. Auscultation demonstrated a commencement of endocarditis and particularly of the aortic ventricular orifice. The patient had never been submitted to any special treatment for this cardiac complication. Two tablespoonfuls of *solution Iodide of Strontium* (Paraf Javal) were administered, which was perfectly tolerated. Under its influence the dyspnœa and oppression disappeared entirely in the course of two months.

Our conclusions upon these and other observations show that Iodide of Strontium by its favorable and rapid action in morbid cardiac and cardio-pulmonary troubles, are that this salt is superior and preferable to Iodide of Potassium, for in no case has any symptom of intolerance such as cephalalgia, coryza, with nasal and hypersecretion, cutaneous eruptions, etc., been noticed.

It is therefore permissible, on the physiological and clinical evidence, to consider Iodide of Strontium as an excellent substitute for the Iodide of Potassium, with this considerable advantage, that, although the dose is the same as that of the potassium salt, it may be increased when necessary without having to fear the intolerance, which would almost certainly follow larger doses of the latter.

The indications for the use of Iodide of Strontium are of course those of Iodide of Potassium, in which are included cardiac and cardio-vascular affections due to arterio-sclerosis; lesions of the myocardium and intra-cardiac orifices, asthma, angina pectoris, and in chronic and muscular rheumatism and gout, it is also indicated in the treatment of that large class of skin affections recognized to be amenable to Iodine, also in inflammations of a strumous type.

It may be advantagously employed in inflammatory conditions pleurisy, peritonitis, either simple or tuberculous; pericarditis, certain forms of pneumonia and in pulmonary emphysema.

This medicament is clearly indicated moreover in the treatment of enlarged glands such as the amygdalæ, in mammary hypertrophy and in enlargement of the uterus or prostate.

Iodide of Strontium (Paraf Javal) does not set up gastric irritation or cause palpitation of the heart. It is speedily eliminated by the kidneys, while in its various applications, the special action of the Iodine is supplemented by the beneficial effects which Strontium has been proved to exercise on the functions of nutrition.

Deaths Under Anæsthetics.

Gurlt reported to the last Surgical Congress at Berlin the following statistics of deaths under anæsthetics. They are made up from the observations of 62 operators, who anæsthetized 109,196 persons, with 39 fatal results, showing 1 death to 2,800 narcoses. The following were the anæsthetics used:

Chloroform	94,123	narcoses,	36 deaths.
Ether	9,431	"	no deaths.
Ether and chloroform	2,891	"	1 death.
Ether and alcohol	1,381	"	no deaths.
Bromoform with ethyl bromide	2,131	"	1 death.
Penthal	210	"	1 death.

In 2,913 cases the narcosis lasted over an hour; in an operation for utero-vaginal fistula, 4½ hours; in a case of tetanus, 9 hours. In 25 cases, of which post-mortem examinations were made, cardiac diseases were found. The author urges careful examination of the heart before administering chloroform.—*Cond. Extracts.*

One of the most reliable and well known Surgical Houses in this country is that of Bartlett, Garvens & Co., whose advertisement appears regularly in this Journal. They are, to a great extent, headquarters for the Southern trade, being located at Richmond, which makes their house easy of access. Their goods are all guaranteed, and are of the finest quality. Send for their catalogue and price list.

The salaries of Medical Professors, attached to the chairs of medicine, surgery and obstetrics in the Universities of Edinburgh and Glasgow are $3,000. It is now proposed to reduce the corresponding salaries at Aberdeen University to the same figures. The men occupying these chairs are allowed to practice. The salaries in other departments are higher, but practice is forbidden.

SYR. HYPOPHOS. CO., FELLOWS

Containing the Essential Elements of the Animal Organization—Potash and Lime;

The Oxidising Agents—Iron and Manganese;

The Tonics—Quinine and Strychnine;

And the Vitalizing Constituent—Phosphorus; the whole combined in the form of a Syrup with a **Slightly Alkaline Reaction.**

It Differs in its Effects from all Analagous Preparations; and it possesses the important properties of being pleasant to the taste, easily borne by the stomach, and harmless under prolonged use.

It has Gained a Wide Reputation, particularly in the treatment of Pulmonary Tuberculosis, Chronic Bronchitis, and other affections of the respiratory organs. It has also been employed with much success in various nervous and debilitating diseases.

Its Curative Power is largely attributable to its stimulant, tonic, and nutritive properties, by means of which the energy of the system is recruited.

Its Action is Prompt: it stimulates the appetite and the digestion, it promotes assimilation, and it enters directly into the circulation with the food products.

The prescribed dose produces a feeling of buoyancy, and removes depression and melancholy; *hence the preparation is of great value in the treatment of mental and nervous affections.* From the fact, also, that it exerts a double tonic influence, and produces a healthy flow of the secretions, its use is indicated in a wide range of diseases.

NOTICE -- CAUTION.

The success of Fellow's Sprup of Hypophosphites has tempted certain persons to offer imitations of it for sale. Mr. Fellows, who has examined samples of these, **finds that no two of them are identical,** and that all of them differ from the original in composition, in freedom from acid reaction, in susceptibility to the effects of oxygen when exposed to light or heat, in **the property of retaining the strychnine in solution,** and in the medicinal effects.

As these cheap and inefficient substitutes are frequently dispensed instead of the genuine preparation, physicians are earnestly requested, when prescribing the Syrup, to write "Syr. Hypophos. **Fellows.**"

As a further precaution, it is advisable that the Syrup should be ordered in the original bottles; the distinguishing marks which the bottles (and the wrappers surrounding them) can then be examined, and the genuineness—or otherwise—of the contents thereby proved.

Medical Letters may be addressed to

Mr. FELLOWS, 48 Vesey Street, New York.

Charlotte Medical Journal.

E. C. REGISTER, M. D., J. C. MONTGOMERY, M. D.,

Editors and Publishers,

No. 36 South Tryon Street, Charlotte, N. C.

SUBSCRIPTION. $2.50 PER YEAR.

Articles intended for the Original Department of the Charlotte Medical Journal will be accepted only with the understanding that they are contributed to it exclusively.

THE April 8th issue of The Times and Register is devoted to Electrolysis in Strictures.

ONE thousand one hundred and fifteen lepers are reported at the upper settlement in Hawaii, April 1st, 1892. Still we want to attach Hawaii, do we?

WE have been informed that Dr. Jenkins, physician for the port of New York, is opposed to any system of National Quarantine. Dr. Jenkins said he kept the cholera out last year and he could do it again. This may be so, but we would rather not risk it, though we have great confidence in Dr. Jenkins.

MESSRS. MACMILLAN & CO. announce the issue of an Appendix to the recently-completed edition of Foster's Physiology in four parts, under the title of "Vol. V. The Chemical Basis of the Animal Body," by A. Sheridan Lea, M. A., F. R. S. Dr. Lea is lecturer on Physiology to the University of Cambridge.

IT would be painfully interesting to know how many people died from the effects of the stormy weather at Washington during the inauguration. How silly some people are, people who have lived in Washington from their birth, who have seen military all their lives, yet they will stand in a damp place, with head unprotected, and watch the procession go by. Nothing in the world but a crowd of men, and part of them drunk, and a bunch of bayonets. Numbers must have caught cold and died from this exposure. It seems that people must die, and if we have no wars or pestilence, we must have two or three inaugurations to destroy a certain per cent. of the human race.

THE opening article in this issue, as will be seen, is written by Dr. Annie L. Alexander, of this city. Among other interesting communications which we are glad to give our readers, we are especially proud of this one. The subject is certainly one of the most important just at this season of the year, and the proficiency of the doctor in this line is clearly shown by the manner in which she handles the subject.

THE sudden death of Col. Elliott F. Shepherd, a prominent New York citizen, has caused a great deal of gossip and newspaper comment, which seems altogether unnecessary. When anæsthetics are given there is always danger attached to its administration. Because this was Col. Shepherd, who was well known for many reasons, seems to increase public censure, and add greater blame to the attending physicians. The attending physician, Dr. McLure, and the surgeon, Dr. McBurney, are men of the highest rank in the profession, and the criticisms and comments that have recently been brought against these gentlemen are wholly uncalled for and unjust. The newspapers, as they usually do, take the whole matter in their hands, and if there are no facts, they establish such from their headquarters, whether good or bad, and circulate them in their columns.

CALIFORNIA FIG SYRUP COMPANY.

EVERY valuable product has its imitation. When a remedy has been placed on the market that has made for itself an enviable reputation, we often see following it a medicine manufactured by a different house, under the same title, though always an inferior product. The California Fig Syrup Co. have recently had some trouble through houses imitating their goods. A just decision from the United States Court of Appeals, in January, confirmed the right of the California Fig Syrup Co., of San Francisco, to the exclusive use of the name Syrup of Figs, or Fig Syrup Co., to distinguish this medical product from all other medical compounds, and declared the name to be a legitimate one for which it was used. This is not only gratifying to the company and physicians, but also other houses whose names have been infringed upon can follow the example. It will teach imitators and deceivers the utility of law in this country. No preparation has been placed on

the market that has given more general satisfaction than Syrup of Figs. The ladies are fond of it and the children cry for it. It contains nothing injurious and can be given in any and all conditions. We are glad this just decision has been granted them.

ANTIÆOSTINE.

OF the many Anti products recently placed upon the market, none has a brighter field of usefulness than Antiæostine. It is manufactured by the Antiæostine Chemical Co., Newton, N. C. Their advertisement appears elsewhere in this journal. For headache particularly I have used it, and more frequently for neuralgia, and it is certainly one of the finest preparations I have yet used. It is put up in powders and tablets, and one advantage it has over others is that the dose can be repeated at intervals of 15 minutes, with no danger whatever. From a personal familiarity with the drug, I am very fond of it.

THE UTILITY OF BOOKS AND PERIODICALS.

ON one occasion I heard a very distinguished orator, speaking to a large number of young men who were just entering upon life's career, say: Buy books, buy books. Subscribe for periodicals. If you never read a book it will do you good just to read the title, what's on the back, just to have the work lying on your table or in your case, just to look at it.

In looking over the men who constitute or compose a town or city, you will notice that the men who are the best read and posted are the governing men of any community. Now and then you see men who have wealth, and where there is wealth there is power, and these men, through their wealth, command respect and influence. Who would exchange the pleasure of recalling to memory the many pleasant thoughts that have been gathered from reading in the years past or the hours that are now spent in this delightful occupation. The universe is filled with many characters and dispositions. Some are for the greedy dollar alone, others for pleasure, others for fame and honor, but he who can gather to himself his library and there be contented and satisfied, is enjoying the greatest happiness that is given to man. Knowledge is power, and he who reads gets knowledge. 'Tis quite singular, neverthe-

less 'tis true, the majority of people judge a professional man by what he knows about current and the allied literature. Of course to attain any standing in the medical profession you are compelled to study and read the most recent and acknowledged authority on the various subjects of medicine; you must become familiar with the thoughts and theories that are constantly floating around in the different medical periodicals of the day. Some of the most valuable and scientific information is often found among the pages of medical journals. You can scarcely pick up a journal that does not contain something new, some thought, some idea, some treatment, some operation that was unknown to you, and by so reading you become familiar with the best thought of the day, and when emergencies arise you feel able and competent to meet them with courage and fortitude. A friendly word from this journal to its many readers is to buy as many good books and the best medical books that your means will allow, and when old age hovers over you you will not only feel proud for being a better informed man, but you will also have a handsome library, and there is nothing more valuable or that is held in as tender recollection than a collection of handsome books.

THAT the confidences of patients should be held sacred, and that revelations of autopsies should be equally sacred, has been for centuries a medical law. There is at present an entirely too prevalent tendency to breach of such confidences among coroners and other politicians who thus pander to the sensation-mongers of the press. One very brutal New York instance of this kind is thus deservedly censured by the New York Medical Journal:

"The autopsy, while not revealing that the young woman had the dread of maternity as an incentive to suicide, suggested that she might have been driven to the deed by remorse for recent conduct, and had a reason for passing herself, in contemplation of suicide, as a married woman." This horrible inuendo, printed in a newspaper, is the consolation that the young woman's afflicted parents receive! It is attributed to the coroner who officiated in the case, and up to the time of writing this paragraph we are not aware that he has repudiated it. It seems to be susceptible of more than one interpretation, but the public has put upon it the more obvious one, and current comment on it takes an angry tone

—a tone that augurs well, we hope, for the movement in favor of substituting something like the Massachusetts system for that under which inquisitions as to causes of death are now conducted in this State. In this case the dead girl's parents are entitled to the community's sympathy, and we believe that they have it; at all events, it may be said for the relief of their feelings that the necropsy does not seem to have included the sort of examination that would be indispensable to the establishment of facts justifying, if anything could, a public statement intended to convey the meaning that is commonly understood to be the purport of the one we have quoted. The fact that the coroner in this instance is a physician makes the case a proper one for comment in a medical journal, and the fact that this physician is a coroner does not seem to us to exempt him from the obligation to confine his investigation to the task of ascertaining the cause of death, or from his professional duty not to reveal secrets of this nature.

SALO-SEDATUS.

THIS is a preparation resulting from the union of Salol and Acetanilid skilfully combined. It is an elegant preparation. The manufacturers of this product have spared no time, labor nor expense that they might give to the profession a perfect remedy. It is not o[illegible] remedies for headache and neuralgia, but [illegible] antiseptic and dis- [illegible] pleasant

BOOKS RECEIVED.

MINERAL SPRINGS AND HEALTH RESORTS OF CALIFORNIA. By WILLIAM ANDERSON, M. D., M. R. C. P., London; M. R. C. S. England, etc. Published by The Bancroft Co., San Francisco.

PYE'S SURGICAL HANDICRAFT. Revised and Edited by T. H. R. CROWLE, F. R. C. S. Complete in one volume. Published by E. B. Treat, New York.

THE SCIENCE AND ART OF OBSTETRICS. By SHELDON LEAVITT, M. P. Second Edition. Published by Gross & Delbridge, Chicago.

MANUAL OF CHEMISTRY. By W. SIMON, Ph. D., M. D. Fourth Edition. Lea Brothers & Co., Philadelphia.

These books will be reviewed in June issue.

VERDI'S SPECIAL DIAGNOSIS AND HOMŒOPATHIC TREATMENT OF DISEASE FOR POPULAR USE. Including Such Functional Disturbances as are Peculiar to Girls and to Maternity. By TULIO DE SUZZARA-VERDI, M. D. Philadelphia: Boericke & Tafel, 1893.

I have read this book with unusual interest; it always gives me pleasure to review a book like this. Its author is one of the most eminent homœopathic physicians of America, and has given the profession a book that is thoroughly practical, full of the newest facts as regards the causation, diagnosis and treatment of disease. His exhaustive description of how to nurse the sick, and especially how to feed them, is indeed excellent. The author has left out all technicalities, so that it can be useful to all intelligent people in case of emergencies. In his description of [illegible]uses of typhoid fever, I notice that he includes [illegible] in the treatment of [illegible]

getting up a book so handsomely printed and bound. I consider the work very valuable, and recommend it.

THE SCIENCE AND ART OF MIDWIFERY. By WILLIAM THOMPSON LUSK, A. M., M. D., Professor of Obstetrics and the Diseases of Women and Children in the Bellevue Hospital Medical College; Consulting Physician to the Maternity Hospital and to the Foundling Asylum; Visiting Physician to the Emergency Hospital; Gynæcologist to the Bellevue and the St. Vincent Hospitals, etc., etc. New Edition, revised and enlarged, with numerous illustrations. Pages 761. Published by D. Appleton & Co., New York. 1892.

Dr. Lusk's work is too well known to need an elaborate introduction. Those who have watched the progress and advancement of Midwifery know that there is no department of medicine in which more has been done of late years, and none in which modern views of practice differ more widely from those prevalent only a short time ago. This book adds another gem to the literary productions of the day. The author has placed in the hands of the profession an epitome of The Science and Practice of Midwifery, with all recent advances. This is the fourth edition of this work, the third being issued only seven years ago, yet this one reads like a new book. The first chapter is devoted to a general description of the female organs of generation. The author has dwelt especially on the practical part of the subject, so as to make the work a useful guide in this most anxious and responsible branch of the profession, affording ready and reliable help in embarrassing emergencies and preparing him to safely and properly conduct labor through its various stages in the most fashionable manner. This, the fourth edition, is greatly enhanced by the many numerous illustrations, colored plates, engravings, and the many changes in conforming to the newer teachings of asepsis and antisepsis. The chapter on the management of the puerperal state is full of good common sense. Speaking of the vaginal douche, the author has this to say: "Against its employment it may be urged that, in spite of the addition of carbolic acid or corrosive sublimate, there is statistical evidence that the vaginal douche augments the chances of infection. In hospital practice it has invariably increased the morbidity and mortality rate. I still occasionally employ it, not, however, in a prophylactic, but because of the property possessed by heated vaginal injections to assuage pelvic discomfort."

The work contains four plates and two hundred and thirty-two illustrations. The book is well printed, nicely bound and is sim-

ply one of the many handsome and valuable books D. Appleton & Company are now sending out. It will be welcomed by the large number of physicians all over the world who have long used Prof. Lusk's work as their reference and guide, and by the numerous students who have imbibed the author's teachings at Bellevue Hospital Medical College.

HYDROPATHY AT SARATOGA. A Treatise on Natural Mineral Waters. By J. A. IRWIN, M. A., Cambridge, Eng.; M. A., M. D., Dublin University; L. M. Coll. of Physicians, Ire.; Member of Royal College of Surgeons, etc. Cassell Publishing Co., New York.

Saratoga has long been known to be one of the most magnificent resorts in the United States. Society people seeking pleasure and festivities are gratified there. The invalid who is seeking rest and treatment also finds it a comfortable home. In this little book of 268 pages, Dr. Irwin has given us the origin of the mineral waters, classification and analysis, the component parts, the science of bathing, and many other useful and interesting points regarding this great resort. The author, in a very concise manner, states the beneficial effects this water has had in many diseases. In gout, rheumatism, dyspepsia and others; the benefit obtained from the use of this water has often been wonderful. The book is thoughtfully and carefully written. It is well printed and is an attractive little book to have in the library.

ELEMENTARY PHYSIOLOGY FOR STUDENTS, by ALFRED T. SCHOFIELD, M. D., M. R. C. S., late House Physician to the London Hospital; Special Lecturer National Health Society. In one handsome 12mo. volume of 385 pages, with 227 engravings and 2 colored plates. Cloth $2. Philadelphia; Lea Brothers & Co.

The author has given us a very compact Text Book on Physiology for medical students, presenting the facts that have been definitely found out, avoiding the many theories, except when necessary to connect isolated items of positive and essential knowledge. The work is arranged in a very concise style, printed on good paper, in clear type, the important headings being printed in large, heavy type. The marginal notes are one of the nice features of the work, which greatly facilitate the student in epitomizing the paragraphs, and easy of reference. The book is very rich in illustrations. Physiology is the most beautiful and interesting study of any of the branches of medicine. Without a fair knowledge of it, the career of a physician's life is barely a success; the theory and practice of medicine lose their charms; the

science and art of surgery have no fascination; materia medica is but dry, hard facts; chemistry is a dead letter. Without the knowledge of the physiological action of drugs, they cannot be given with as much benefit, either clinically or therapeutically. The book contains 364 pages, with a good index, 227 beautiful engravings, two colored plates containing 30 figures. This work will be of great benefit to students, and the principal reason is that it contains nothing but facts, and the inquirer's time is not occupied in reading many pages of theory, now and then grasping a fact. The work, I think, will meet with great success. Lea Brothers' books usually receive a warm welcome from the profession on account of their many merits. Students needing a Physiology cannot do better than purchase Schofield's.

PSYCHOPATHIA SEXUALIS, With Especial Reference to Contrary Sexual Instinct. A Medico-Legal Study. By Dr. VON KRAFFT-EBING, Professor of Psychiatry and Neurology, University of Vienna. Authorized translation of the seventh, enlarged and revised, German edition. By CHARLES GILBERT CRADDOCK, M. D., Professor of Nervous and Mental Diseases, Marion-Sims College of Medicine, St. Louis; Fellow of the Chicago Academy of Medicine; Corresponding Member of the Detroit Academy of Medicine; Associate Member of the American Medico-Psychological Association, etc. In one Royal Octavo volume, 436 pages, Extra Cloth, $3.00 net; Sheep, $4.00 net. Sold only by Subscription. Philadelphip: The F. A. Davis Company, Publishers, 1914 and 1916 Cherry Street.

Among the many books that have recently been written, the majority of them have been on general works of surgery. The subject chosen in the present work is a very deep and important one. We are not overcrowded with books of this character, and from the thoroughness and scientific standpoint from which the book is treated, it will have ready sale.

The opening chapter is devoted to Psychology of the Sexual Life. This chapter is well written and very entertaining. Every one will admit that both professional and non-professional men are always interested in subjects that treat of sexual life. Anything that pertains to the sensual part of man or woman is always eagerly read. One point that is nicely manifested in this work, which is of much magnitude and scantily understood by the profession, is the close relation of the nervous system to the sexual functions. For instance, in reporting the different cases of a perverted nature they most commonly occur in persons of a neuropathic tendency. From reading this book I have been struck with the number and different channels, the methods by which perverted natures are

gratified. The chapters on Sodism and Machonism are filled with new ideas and information that will be of much value to any physician. Many other chapters are of equal merit. The chapter on Fetichism is a good one. It is full of cases illustrating the many and ridiculous things that men and women of this nature choose as a fetich. One would scarcely believe that such perverted natures exist, until this excellent work is read. The chapters on Homo-Sexuality, Acquired Homo-Sexuality, and Congenital Homo-Sexuality, are all of an high order and are clearly and comprehensively expressed. One of the chief features of the work is the chapter on Therapy. The various medical agents are used to control such affections, yet the author is a great advocate of hypnotism, and judging from the success that has attended him, he has a right to be. Many wonderful cures and great improvement are reported under this treatment. This excellent work contains 346 pages, printed on good paper, in large, readable type. It is handsomely bound and sells for $3.00 cloth, and $4.00 sheep. We are glad to tell our readers that the purchase of this book will be of great benefit to them.

Volume I now ready. A TREATISE ON THE THEORY AND PRACTICE OF MEDICINE, by American Teachers. Edited by WILLIAM PEPPER, M. D., LL.D., Provost and Professor of the Theory and Practice of Medicine and of Clinical Medicine in the University of Pennsylvania. For sale by Subscription only. Price per Volume, Cloth, $5; Sheep, $6; Half Russia, $7. W. B. Saunders, Publisher, 913 Walnut Street, Philadelphia, Pa.

When one picks up this book and glances at the different authors who have composed the work and does not say what a great book! what a store of knowledge, of usefulness, of help and benefit, is hard to please. The first thing that I like about the book is that the name of the author of each chapter is given. This makes no difference so far as the subject matter is concerned, yet some people like to know whether the chapter on Typhoid Fever was written by Pepper or Janeway, Billings or Thompson. Where there is co-operation there is strength and success is necessarily sure to follow, and so with this book, it is the co-operation of a considerable number of physicians of acknowledged authority, who have selected their own subjects, and, of course, those that are the most familiar to them, and they have given us this amount of practical information not otherwise attainable. So far as volume I. extends it presents the field of medicine as it is actually taught

and practiced by its best representatives in America. Hence the name American Text Book. In view of the intimate relations of all questions of hygiene to the causation and prevention of disease in regard to which medical men are constantly consulted and are often indeed obliged to assume weighty responsibilities, the opening chapter has been devoted to hygiene. Under this head it gives a table showing the expectation of life. It is systematically arranged from the records of insurance companies. Considering the predisposing causes of disease the author states that the most important predisposing causes of diseases are those connected with the structure of the body, being individual peculiarities, which may be inherited, or may be congenital but not inherited or acquired after birth. All the articles in this valuable book are of the highest order. They could not be otherwise coming from the leading men and teachers of America, but the one devoted to the subject of fevers, and especially the one on Typhoid Fever will noticeably draw the attention of our Southern readers. Under each head careful attention has been given to the Etiology, Pathology and Diagnosis. Often in books of this character too little attention is given to the treatment of diseases, but with this work, and especially with the chapter on Typhoid Fever, particular attention has been given to the treatment. Under each disease revised and approved formula are given. The book is replete with good practical information from beginning to end.

If there is any branch of medicine that new ideas, new thoughts and new treatment are constantly being advanced to the intelligent part of the profession and for the betterment of humanity, it is the practice of medicine, and the only way to keep abreast of the times and be able to cope with your fellow physicians and friends is to buy such books as these, read and study them. The science of the practice of medicine has made wonderful progress in the past seven years. Every new idea, every advancement in Bacteriology, every step in Pathology, Symptomatology, Diagnosis and Treatment will be concisely given in these volumes. You cannot practice medicine in 1893 from books written in 1880 or even later. Every chapter is fully dealt with, even the one on Measles. I notice that the author advises phenacetine in associated nervous distress. I cannot congratulate the author too warmly on the results of his labors thus far, nor can I recommend the work too strongly to the

profession, progressive student and advanced pathologist. The volume is elegantly printed, tastefully bound and aside from its other merits is a triumph of typographical art.

DR. H. Q. ALEXANDER, a prominent physician of this county, gave us a pleasant call a few days ago.

W. H. WEARN, a popular druggist of this city, has been appointed, by Gov. Carr, a member of the State Board of Pharmacy for a term of five years. Gov. Carr is to be congratulated on his wise selection.

Was It Faith?

Medical circles in St. Louis are considerably agitated at present over an apparently miraculous cure of a young lady who sustained a serious injury to the knee-joint. The patient, an inmate of Marysville convent, and of a very nervous temperament, fell while skating, the injury developing synovitis. The usual treatment was used, followed by the application of a plaster cast. The case progressed slowly, but in the meantime the Sisters in charge of the convent were not idle, but offered up prayers many times daily for their afflicted companion. The next Sunday morning the attending physician was astonished to find his patient walking about attending to her usual duties, apparently as well and sound as ever.—*Medical Herald.*

Goodwyn's Syrup Hypophosphites Compound grows more popular from day to day. Just so with any preparation which has been tried and tested and found to fulfill every requirement that it claims. It is the only preparation that contains all the Hypophosphites with Lactates and Pepsin. It acts promptly on the digestive organs and gives permanent increase of strength and endurance. This preparation is manufactured by the Goodwyn Syrup Co., Macon, Ga. Samples from physicians are solicited by this house. See advertisement elsewhere.

DECATUR, MICH., Jan. 3d, 1893.

Detroit Pharmacal Company, Detroit, Mich.:

Messrs.—I consider that Apodyna is superior to Antikamnia in many respects. Very respectfully, J. E. MAXWELL, M. D.

Selections.

Technics of Practice with Dosimetric Granules.

BY W. C. ABBOTT, M. D., RAVENSWOOD, CHICAGO, ILL.

Editor Medical World:—Next to being able to make a correct diagnosis and knowing the possibilities of the remedies at our disposal, in determining success in practice, comes the handiness with which we use them, the ways adapted to make our practice easy for ourselves and our directions readily comprehended by our patients. It is needless to say one should be well supplied with granules to the full extent of his knowledge of how to use them. In the office they should be alphabetically arranged in a neat, handy receptacle (one of which I will explain at another time) in bottles of 500 to 1000 each. This case should also be provided with drawers for ¼, ½ and 1 dram phials with corks to fit, as well as small dispensing envelopes, say 2⅞ and 1¾ inches, plain or printed, with name and address, office hours, etc., and a little box of gummed labels. A few gummed stickers the size of your thumb nail are very useful as will be shown further on. Thus provided for you are ready for business.

We will suppose it is the morning office hours. A lady calls, not very sick; feels tired all the time; appetite poor but tongue fairly clean; bowels constipated. After due deliberation, for nothing should be done hastily, it is decided to give arseniate of strychnine and podophyllin. The granules are poured out on a clean piece of blotter or cloth (the heat of the palm of the hand will be apt to make them sticky) twenty-four of the one and twelve of the other, and as they are of distinct colors they are put together in a ½ dram phial closely corked. This is then put in an envelope on which has been previously written: "Take two white and one dark before meals" Meanwhile give due directions regarding diet and tell your patient "if stools become frequent to omit the dark granule at noon," not forgetting to tell her to consult you again in a few days.

The granules above mentioned are so very unlike that they may be safely dispensed together and so commonly prescribed that no case notes need often be kept. Suppose, however, instead of constipation, palpitation was the prominent symptom. In this case

strychnine arseniate and digitaline which would be no doubt prescribed, are so nearly of a color that you would put them in separate phials and use a "sticker" on each, which you would mark in some way intelligible to yourself but *not to your patient.* Now make a note in your case book with name, date and prescriptions. number them say, 1 and 2, and put the corresponding numbers on the phial. Having directed on the envelope "two of No. 1 before meals and two of No. 2 two hours later," you can dismiss your patient, sure you will do her good and that you will know what you prescribed in case she calls for a renewal or to consult you again.

Soon a small boy rushes in before school and says, "Annie has got cramps and diarrhea and mother wants some medicine." You know the child well, a little girl four years old, and start at once to fix the medicine, asking, meanwhile, "does your mother think Annie has any fever?" The uneasy messenger says, "I dunno, but she smells orful." Here, then, three indications are to be met: pain, fetor and diarrhea, accompanied, we are safe in presuming, by more or less fever, requiring less drugs and no end of detail. Let us take a short cut and in our record write:

"Annie B., age four years. Fetid diarrhea, with colic and probably fever."

		No. Granules.	No. Doses.
℞	Sulpho-carb. zinc .....1-6 grain	20	20
	Aconitine.....1-134 grain	4	
	Hyosciamine .....2-250 grain	2	
	Codeine .....1-67 grain	10	

Sig.—One dose every half hour till relieved.

Now select the granules determined upon, put them all together in a phial and direct on the envelope: Dissolve all the granules in twenty teaspoonsful of water, sweeten and give a teaspoonful every half hour till relieved, then continue in hourly doses. Be sure and tell the boy "if Annie is not better by the time the medicine is half gone, they must send for you." You will likely never hear from this case again.

With office patients well known to me I often cut it short by making note of the prescription on the back of the envelope used and order it kept and returned.

Office hours are over and with a well filled case of 60 to 100 phials (with a good pocket for prescription blanks, and a thin note book) stowed away in a small hand-bag, in which are surgical in-

struments, dressings, a tin box of empty capsules (I carry No. 4), catheters, etc., etc., the morning round begins.

You first answer a call that came anxiously during the morning office hours. A sharp, pronounced fever with great depression, character unknown, very likely typhoid. Temperature 104, pulse 120, tongue white, bowels have not moved for three days, head aches badly—in fact, this young man is, as he expresses it, "all broke up." You will probably decide to give aconite for the fever, strychnine for the depression and sulpho-carbolate of zinc for the intestinal decomposition that is undoubtedly taking place as well as a flush with seidlitz salt. You will ask for two little dishes, individual butter plates I like best, sauce plates or saucers will do, cups inverted, small glasses, egg cups, in fact, anything at hand may be made use of. *Always look to see if they are dry.* Count out twelve aconitine 1-134, and the same of strych. ars. for one dish (aconitine is colored pink for convenience in dispensing together in this way) and 24 of the zinc for the other. Direct one of each of the one and 2 of the other together every half hour till you call again, which should be in five or six hours. At the same time prescribe a bottle of seidlitz salt and direct a teaspoonful in half a glass of cold water hourly till bowels move freely.

The next case may be one say of malarial fever in which you this morning see fit to prescribe ars. quinine, 2 every two hours, also ars. strych. 1 every two hours. Being provided with two suitable dishes you put in twice as many of the one as the other and direct them to be given in alternate doses one hour apart. Now these granules look just alike, so, to avoid mistakes, put into the ars. of quinine, of which you wish to give two, two bright-colored granules as markers (I use red iodide of mercury) and into the ars. strych., one.

If accustomed to the use of the granules one will have no difficulty in recollecting the prescriptions the next day, but if at all likely to forget, make a record in the little case book mentioned above. Never leave more than will be needed by the time of your next visit, when you can renew or change as you see fit without comment. Visits made when patients are told to go on with the medicine are liable to be looked upon as useless.

Your next case may be in a family where you doubt their ability to give the medicine accurately as dealt out in open dishes. In

such a case, if the granules used are not too bitter, dissolve them in water, giving "spoonful" doses; or the empty capsule may be used, putting a dose in each. In making capsules always pour your granules out on *cloth* to prevent their rolling, and have the corked phial by the side of each kind till you are done, when you will know just where those that are left belong, and may avoid accident thereby.

At another place a patient is in bed nursing herself. Granules in open dishes on a chair are liable to all sorts of accidents, which may be obviated by placing them in a phial (which is always the best way to dispense) to be tucked under the pillow or with a bit of string tied to the bed post or a button of the patient's bed garment.

And so you go on and on, meeting the emergencies as they arise, making a virtue of necessity, using skill, tact, forethought, and much ingenuity, to make your practice not only successful but acceptable and pleasing to those who employ you.

Many drugs in granule form, unless so held by hard gum or other inert matter, so slowly soluble that it renders the granule practically worthless, will gather moisture when exposed for hours to the atmosphere of most homes. These are readily found out by experience and should be dispensed in small quantity in phials or capsules; but if open dishes must be used, sprinkle them with a little powdered sugar or starch, or, setting the dish on a folded cloth cover with an inverted teacup or bowl.

The utility of these things, simple as they may seem, will present itself to all who have worked along this line.

Returning to your first patient later in the day, lo! what a change. Eyes are bright, tongue moist and clean, skin natural, fever nearly gone and patient declares he is well. Granules are all gone and after the third dose of seidlitz salt bowels move freely. You advise another day in doors, light diet, morning doses of seidlitz salt and give thirty or forty granules of ars. strych., to be taken two before meals for a few days. You ask him to call the second morning and you will see about his going to work. He don't come and when he calls to pay his bill he says "he went to work the next day and has been all right ever since."

And so it goes on day after day, in a successful general practice, your patients are healed, 1. promptly, for you are using "arms of

precision;' 2. safely, for you are giving them in small doses, in a soluble, readily assimilable form, giving no possibility of cumulation, and will stop when the desired effect is produced; and, 3. pleasantly, for all nauseating smell, sight and taste is avoided by the use of the sugar-coated granule.

To some these minutiæ may seem puerile, even simple, and you will go on with your bottles, capsules, pills and powders, but to the many who are bound to do *the best they can for their patrons and themselves*, some suggestions may be helpful. Be sure you are right then go ahead.

Notes.

Few physicians, who have practiced medicine five years, but have assured some patient relief, in the use of cod liver oil, only to see the patient sink lower and lower, from want of power to digest the remedy. Cod Liver Clycerine removes this difficulty; capable of being diluted with water, requires no digestion, but is a digestive stimulant. If you give Cod Liver Glycerine it will be assimilated. It combines readily in all prescriptions.

The Superintendent, and Surgeon in charge of St. Louis City Hospital, Dr. H. Marks, announces that Cod Liver Glycerine is now used in that institution. Its power to mix uniformly in any proportion, in all prescriptions, or to mix with water and spirits without separating on standing, renders it the most desirable reconstructive in the convalescent period of difficult surgical cases, or acute diseases attended with emaciation; while its digestive properties insures its therapeutic action.

Dr. Carl Seiler, the eminent authority on throat diseases, says: "Owing to the perfect solubility and superior digestive power of Webber-Pepsin, S. & D., this brand is the best adapted for preparing an efficient digestive fluid for use in the treatment of diphtheria whenever it is desirable to remove the false membrane through the agency of pepsin. Inasmuch as this ferment is capable of doing its best work in the presence of 0.2 per cent. absolute hydrochloric acid, a satisfactory vehicle may be prepared by dissolving 11 minims hydrochloric acid, C. P., in 4 fluidounces of water." This to our mind is proof positive of the marked superiority of Webber-Pepsin, S. & D., over all others.

Trional.

Cases of sleeplessness, whether dependent upon functional or organic troubles, are of frequent occurrence in the practice of every physician, and often prove extremely rebellious to treatment. Of the many hypnotics and sedatives in the pharmacopœia few combine the qualities of efficiency with freedom from toxic action or unpleasant after effects, and aside from this after continuous use a tolerance is established necessitating a change of remedies. For this and other reasons the recent discovery of a new hypnotic, Trional, to judge from careful clinical experimentation, is both safe, prompt and efficient, will be welcomed by every practitioner. Dr. Boettinger [Berlin Klinische Wochenschrift, Oct. 17, 1892,] has subjected Trional to an exhaustive clinical investigation in Professor Hitzig's clinical, employing it in seventy-five cases. The usual dose was one to two grammes administered in the evening, but sometimes it was given in divided doses during the day. In cases of simple sleeplessness occurring in functional and organic nervous diseases a single evening dose of one gramme often produce uninterrupted and usually deep sleep from fifteen to forty-five minutes, and with the exception of slight giddiness in one instance there were no unpleasant after-effects such as are so frequently observed after the use of other hypnotics. In the insomnia of mental disease the hypnotic effect of Trional was always promptly exhibited if excessive mental excitement did not exist; but even in some cases of marked non-alcoholic delirium an excellent result was obtained by the administration of fractional doses. It may be given per rectum in somewhat larger doses with as prompt effect as by mouth—a point of importance in cases of severe mental disorder. Another advantage is that patients do not become addicted to it even after continued administration for a long time. Aside from cases of sleeplessness due to severe bodily pain, acute alcoholism, and sevère mental excitement, Trional seems to be a hypnotic, efficient, safe, prompt and pleasant in its action, and a valuable addition to the materia medica.

FAIRHAVEN, WASHINGTON, Nov. 14, 1892.

DETROIT PHARMACAL COMPANY, Detroit, Michigan:

Dear Sirs:—In Migrain and all forms of headache, I find it superior to Antipyrine, Antikamnia, Antifibrin, and Phenacetine.

Yours, &c., A. B. MCKINNON, M. D.

Ch. Marchand's Trade Mark.

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PREVENTS FERMENTATION OF FOOD IN THE STOMACH.
MOST POWERFUL REMEDY FOR HEALING PURPOSES. CURES:
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PEROXIDE OF HYDROGEN

(MEDICINAL) H_2O_2 (ABSOLUTELY HARMLESS.)

MOST POWERFUL BACTERICIDE AND PUS DESTROYER.
ENDORSED BY THE MEDICAL PROFESSION.
UNIFORM IN STRENGTH, PURITY AND STABILITY.
RETAINS GERMICIDAL POWER ANY LENGTH OF TIME.

USED BY THE HOSPITALS OF THE U. S. ARMY.

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NOTE.—Avoid substitutes—in shape of the commercial article bottled—unfit, unsafe and worthless to use as a medicine.

Ch. Marchand's Peroxide of Hydrogen (Medicinal) is sold only in 4-oz., 8-oz., and 16-oz. bottles, bearing a blue label, white letters, red and gold border, with his signature. Never sold in bulk.

PHYSICIANS WILLING TO PAY EXPRESS CHARGES WILL RECEIVE FREE SAMPLES ON APPLICATION.

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—AN—

IDEAL VEGETABLE ALTERATIVE.

It is daily used with success
in the treatment of such conditions as

SYPHILIS,
RHEUMATISM,
SCROFULA, ETC.

WRITE FOR

"A VOICE FROM THE SOUTH."

FOR PHYSICIANS ONLY.

CLEMIANA CHEMICAL COMPANY,

ATLANTA, GA.

Abstracts.

Swallowing a Watch.

The freaks of lunatics are sometimes extraordinary, and one of the most remarkable which has been placed on record recently is that which Dr. Vallow has published in the current issue of a French contemporary. A man, aged 37, was confined in an asylum suffering from hallucinations, and one day, his wife having come to visit him, he was permitted to see her. When the allotted time of the interview, according to the rules of the institution, had come to an end, his wife intimated that she would have to take her departure, whereupon the patient, judging that she wanted to leave him before the time had expired, flew into a violent passion and accused her of deceiving him. To prove, however, the truth of her statements, she drew out her watch and showed him the time, but as soon as the patient saw the watch, he suddenly seized it in his hand, tore the chain from it, and, putting it in his mouth, swallowed it. The medical officer of the asylum was summoned at once, but the patient in no way appeared to have suffered from his curious freak. On examination of the stomach nothing could be felt, and it was at first believed that after all the watch might not have been swallowed. However, all due precautions were taken, and on the sixteenth day the watch arrived per naturalem viam. It was a silver watch measuring about two inches and a half in diameter, exclusive of the ring, and about half an inch in thickness.—*Medical Review.*

The Legislature of Pennsylvania has passed a bill establishing a Medical Council and three State Boards of Medical Examiners; applicants must have studied medicine four years. The work of the examining boards to be supervised by a Medical Council composed of the Lieutenant-Governor, the Secretary of Internal Affairs, the Superintendent of the State Board of Health, together with the Presidents of the three examining boards.

Timid Lady—"Oh, doctor, do you think cholera will get a foot hold in America?"

Doctor—"Certainly not, madam, that isn't the kind of a hold cholera gets in any country."

Obstetrical Don'ts—For Beginners.

1. Don't indulge in the routine practice of administering ergot after every labor; only give it where there are indications of impending hemorrhage. 2. Don't give vaginal injections prior to parturient act; it may do very well in hospital practice, but it is often the means of conveying infection in private practice. 3. Don't allow the mother or nurse to dictate your management of the case. 4. Don't use pads, cloths, or binders that have been used, unless they have been thoroughly boiled and immersed in bichloride solution; it is better not to use them at all. 5. Don't leave your patient until all danger of *post-partum* hemorrhage is over. 6. Don't fail to have your hands, body, and clothing clean, and always thoroughly wash your hands and arms before touching the patient. 7. Don't allow your desire to save time cause you to use forceps. 8. Don't indulge in too frequent vaginal examinations. 9. After the completion of the third stage of labor don't touch the parts again so long as the patient continues to do well, save for cleanliness and removal of pads, and trust this to the nurse. 10. Don't fail to instruct the nurse to burn all cloths and pads immediately after removal from the patient. 11. Don't allow the nurse to use old pieces of linen, etc., as vulval pads, unless they have been previously boiled and soaked in bichloride and dried before being placed upon the patient; the best pads are made by inclosing a piece of absorbent cotton in bichloride gauze of proper size and fastening to the binder behind and in front by means of safety pins; wood-wool pads are also very good. 12. Don't use chloroform except when necessary to allay the severity of the pains, or where forceps are indicated; it should then be given to complete anesthesia; its use always increases the danger of *post-partum* hemorrhage.—*American Practitioner and News.*

He was a Dentist.

Polite Waitress—"Tea, doctor?"
Doctor—"No, coffee, if you please."
Waitress—"Roast beef, doctor?"
Doctor—"If you please."
Waitress—"Corn, doctor?"
Doctor (indignantly)—"No, madam, I am a dentist."

Physicians who have been disappointed in the use of favorite Prescriptions have the remedy in their own hands. Prescriptions and orders should read "Wm. S. M. Chem Co."

GREEN : DRUG FLUID EXTRACTS

CHARACTERISTICS:

UNIFORM STRENGTH, CONVENIENCE OF ADMINISTRATION, NON-LIABILITY TO DETERIORATION BY AGE, POSITIVE THERAPEUTIC EFFICACY.

The WM. S. MERRELL CAEHEMICAL CO. will not hold themselves responsible for the identity of Fluid Extracts, filled out by druggists from bulk stock, even though the written label may read "Merrell's." **CAUTION.**—Accept original packages only.

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NATURAL.
FROM
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TRUE
SALICYLIC ACID.
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IT IS ACKNOWLEDGED THAT

COMMERCIAL SALICYLIC ACID AND ITS *SODIUM SALT*	are elow but certain poisons. produce symptoms closely resembling delirium tremens. patients become delirious. dangerous to humrn life. have to be watched and not to be trusted. retard convalescence. should not be administered internally, however much they may have been dialized or purified.

Order and Prescribe ☞ { ACID SALICYLIC—True—MERRELL.
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FLUID HYDRASTIS.

A solution of definite strength and reliability, representing all the valuable constituents of the drug—the offensive and irritating resins being rejected. The only perfect representative of the drug in the fluid form within reach of the medical profession. Though often attempted it has never been successfully imitated. Send for our pamphlet on "Hydrastis and its Preparations."

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FOR THE LOCAL TREATMENT OF

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The most efficient and cleanly means of introducing remedies into the vagina. Antiseptic, perfectly soluble and reliable. Each capsule contains an absorbent tampon which may be medicated with any remedy indicated.

WHEN?

In all cases of acute and chronic inflammation of the lining of the womb, gonorrhoel, syphilitic, purulent and leucorrhoeal discharges.
Relaxation of the uterine ligaments and weakening of the vaginal walls.
Falling of the womb. Ulceration of the osuteri.
Disease of the ovaries and fallopian tubes.
Painful and scanty menstruation.
Where the womb is extremely irritable and neuralgic.

HOW?

Moiston the tampon with the remedy, draw it back into the capsule by means of the linen thread, replace cap and insert.

WHAT?

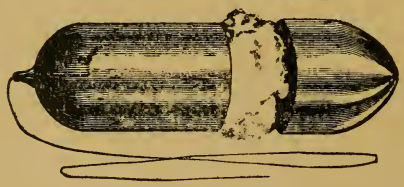
The result is a grateful relief to the sufferer and satisfaction to the physician. No handling of disagreeable drugs; no loss of medication in the introduction, no soiling of linen.

THE VERDICT!!

RATIONAL. CONVENIENT. CLEANLY. EFFICIENT.

Three Sizes.

No. 1 Small
No. 2 Medium
No. 3 Large



Tampon.

Absorbent Cotton, Oulo-Kutun (Wool and Cotton) or Wool, as desired.

Exact size of No. 2 Capsule.

Any size by mail postpaid on receipt of price, 60c. per box.

VALUABLE AS A PESSARY.

Extract from a letter from Dr. A. J. Howe, Professor of Surgery, Eclectric Medical Institute, of Cincinnati, O.

"The Anderson's Vaginal Capsules charged with tampons of Oulo-Kutun are a convenient vehicle and medium for introducing douches or medicated fluids into the vagina, and retains them there. Astringent, sedative and antiseptic liquids may he thus employed, instead of the syringe as an implement, or a speculum,"

Respectfully, A. J. HOWE, M. D.

☞ Send for printed matter containing valuable information.

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Have you seen our "Ruby Capsule" for disguising the physical appearance of prescriptions, and for use when two medicines are to be taken in alternation? Send 10c. for trial box of 100.

A Local Mistake.

A Jacksonville, Florida, correspondent sends the following: A marriage between two Florida crackers took place not far from this city quite recently. The usual bliss of the occasion was indulged in by all until the crowd dispersed, and the couple retired; when a little episode becomes known to this effect:

The bride went to bed with her corset on, the string of which, like the knot they had tied with their tongues, could not be very easily undone; hence, as the groom was interested in the bride's comfort, he of course suggested at once to cut it. "Cut it," he cried. "No, don't," the anxious mother, with her dull ear at the key hole exclaimed precipitately; "Oh, no, no, James, don't cut it; it will stretch."

Ahem!

A case of considerable interest, occnrring in the practice of the writer, is as follows: Mrs. X came to my office last April stating that she had missed her sickness and was suffering from nausea and vomiting. Physical examination showed some softening of the cervix, which was high up in the pelvis and pushed over to the left. This was due to a solid tumor of the ovary on the right side about the size of a man's fist. A diagnosis of pregnancy in the third month was made, and the following three propositions were made to the patient and her husband: (1) Shall we allow the pregnancy to proceed, watching case from time to time? If the tumor goes above the womb, allow the pregnancy to go to full term; if the tumor is caught between the sacrum and the womb, then the induction of abortion. (2) Immediate ovariotomy, allowing pregnancy to proceed to term. (3) Immediate induction of abortion.

The patient, after consultation with two other physicians, decided upon the first course. At the beginning of the sixth month the tumor was low down in the pelvis, between the sacrum and the womb, and it was immovable. Realizing that if pregnancy was allowed to continue that there could be no hope of delivering her at term, the induction of abortion was decided upon. A Nelaton catheter properly sterilized and a knot tied into the end was with difficulty inserted into the womb. This was owing to the high position of the cervix. In four days labor pains came on. The

woman delivered without much trouble. She made an uninterrupted recovery and has now consented to have the tumor removed. —*American Practitioner and News.*

Uterine Colic and Ovarian Neuralgia.

Two teaspoonsful of Dioviburnia given in a teacup of hot water will give almost as prompt relief as a hypodermic of morphine and will produce no unpleasant after effects.

Dysmenorrhea.

Salo-Sedatus Chemical Co., St. Louis, Mo.:

While on a train about twelve miles from this place, I heard the cries of a woman on the train. Seeing that she had some spasmodic trouble, I gave her ten grains of Salo-Sedatus, and she was relieved in less than five minutes. She was suffering from Dysmenorrhea and its kindred complaints. I am well satisfied with Salo-Sedatus. Other patients have had the use of it and the effect is immediate, and the results satisfactory. I would like to carry this medicine in my office at all times. It is too powerful a medicine to be without. Please send me twelve ounces of Salo-Sedatus.

D. J. Wells, M. D.,
Texarkana, Ark.

An Epigram Confirmed.

Dr. W. E. Anthony, of Providence, R. I., writes as follows: "When I was a medical student, in 1865, I remember hearing Dr. Oliver Wendell Holmes, then Professor of Anatomy at Harvard College, say to his class: 'When you begin practice you will have twenty remedies for one disease, but after twenty years you will have twenty diseases for one remedy.' That prediction seems to be fulfilled in the use of Antikamnia, which seems to meet so many indications."

Painful Menstruation.

It is questionable whether menstruation was designed to be painless. At any rate ninety per cent. of all women suffer more or less at almost every period. Dioviburnia (Dios Chemical Co.) will in every case give relief, and often cure, by its tonic effect upon the uterus. Formula on each bottle.

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(OPPOSED TO FEVER AND PAIN.)

SALO-SEDATUS is a powerful Antiseptic, Antipyretic, Diuretic and Anodyne. It neutralizes septic poisons, and opposes septic conditions. It rapidly reduces body temperature when above the normal standard, promptly relieves pain, and induces refreshing sleep. It never distresses the stomach nor disturbs the bowels. While it quiets excitement in all parts of the system, it promotes secretion and favors excretion from every direction.

SALO-SEDATUS is a reliable remedy in the treatment of Erysipelas. Puerperal Fever, Typhoid Fever, Dysentery, Scarlet Fever, Whooping Cough, Measles, Small-pox, Malarial Fevers, Rheumatism, Neuralgia, Dysmenorrhea, Cystitis, Metritis, Peritonitis Ovaritis, Headache, La Grippe, and all diseases accompanied with fever or pain. It is an excellent remedy to use in connection with quinine, when quinine is indicated, or to prepare a patient for the kindly action of quinine.

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SALO-SEDATUS is free from the narcotic and depressing effects upon the nervous energies which so often accompany and follow the use of Antipyrine, Veratrum, Chloral, Morphine and kindred drugs. It is vastly superior and preferable to all remedies of its class, and is rapidly superseding all others where it is known. It requires a fair trial only to establish its merits as THE antiseptic, antizymotic, fever and pain remedy. Once familiar with its prompt and reliable action, its convenience and wide range of usefulness, no physician will practice without using or prescribing it.

Send for Pamphlet and Free Sample.

Address **SALO-SEDATUS CHEMICAL COMPANY,**

ST. LOUIS, MO.

"The Action of Phytoline in Obesity."

The statement will be accepted by all that fat is not the highest grade of tissue, its object in anatomy being really as a packing material, externally serving for the artistic purpose of rounding out the lines of the figure in a manner to favor curves and that which is graceful rather than angles and abrupt prominences.

Fat, in proper quantity, favors comfort and favors the really beautiful, and smoothes out the tangled threads of care and the wrinkled lines left by carking worries and the fuming and fretting of the everyday annoyances of life. It does not exist very much as a necessity to the physique, but rather as an accessory. That there can be too much of a good thing, goes without saying, and the numerous mountains of flesh moving about our streets and hiding themselves in their homes, will give evidence in favor of the truth of this statement.

An excessive amount of fat is not only unsightly, but is unhealthy; in fact, as an evidence favoring the thought that fat is a low grade tissue, we speak of other tissues degenerating into fat. Certainly the tendency toward the accumulation of an extra and

unnecessary amount of fat favors a dangerous fatty degeneration of the heart and the tissues forming their important organs.

The proper selection of diet, with exercise, can do much toward the diminishment of fat; but the profession and the laity have long looked for some remedy which could be depended upon to assist toward this consummation devoutly to be wished. In Phytoline we have such a remedy; this remedy being prepared from the active principle of the berries of the Phytolaoca Decandra, after having been touched by the early frost. The remedy has been used for rheumatism for many years, and also for the diminishment of excessive glandular growths, and also as a helper for the drying up and the reducing in size of the breasts of nursing women. Inflammation and abscess of the mammary glands have often been prevented by its use.

The reason for its acting favorably in these conditions have not been given. Clinically the results have been satisfactory. In a number of cases wherein I have directed the using of the Phytoline, for the reduction of fat, I have had favorable results, and I am persuaded that the profession is justified in the use of the medicament. In the several cases wherein used, ten-drop doses were given both before and after the three daily meals, making six dozen per day. The clinical reports are satisfactory. Even though as yet administering this remedy empirically, I feel that the uniformly favorable clinical results justify strong hopes for its use. I have observed nothing objectionable in its application, and shall continue to watch results with interest.

I. N. Love, M. D.,

Ex-Pres. Am. Med. Editor's Ass'n; Ex-Pres. Mississippi Valley Med. Ass'n; Sec'y Section Diseases of Children, Ninth International Med. Cong.; Prof. Diseases of Children and Hygiene, Marion Sims Coll. Medicine, St. Louis; Memb. Board Trustees Pan-American Med. Cong.; Editor Med. Mirror, St. Louis.

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"I certify that Warner & Co.'s Pil. Antiseptic Comp. is an invaluable digestive and Antiseptic Compound, and I cheerfully recommend it to all persons suffering from Dyspepsia, mal-assimilation of food, and especially from fermentative indigestion."—Andrew L. Anderson, A. M,, M. D., F. M. S., Rhea Springs, Tenn.

Charlotte Medical Journal.

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Original Communications.

Chloroform and Morphine Sulphate et. Atropine Sulphate in First Stage of Labor.

BY D. A. STANTON, M. D., HIGH POINT, N. C.

Read Before the Randolph County Medical Society, April 20th, 1893.

Mr. President and Gentlemen:

My coming before you to-day with a paper on the subject announced in your programme does not imply that I am to give you something never heard of before in obstetrical practice. My object is to remind you of what you already know and insist on a more general application of that knowledge in your practice.

I will not consume your time by going into the history of Chloroform and Morphine, and their general application to the relief of pain in surgical operations and diseased conditions, but will be confined to the subject and try to show from a practical stand point, as well as a theoretical, the utility of the remedies mentioned in the first stage of labor.

When we stop to consider the physiological action of Chloroform and Morphine, the plausibility of the practice I am advocating will be patent to every practitioner. It should be the highest object of our professional ministry to relieve human suffering, and when called to a case of confinement, in its first stage, there is often a being loudly calling for that relief which she has the right to expect and receive at our hands, though I must say not always given. It is not always necessary to resort to the remedies mentioned, but it is the exceptional cases that needs our help most, and that will be the class considered.

We will first study some of the physiological effects of Chloroform and the class of cases in which it alone is necessary to relieve.

Second—The physiological effect of Morphine and Atropine and the class of cases which they relieve; and

Third—The combined effect of the two agents and that class of cases requiring the administration of both.

The first effect of Chloroform moderately used, as it should be in labor, is to increase in activity all the bodily functions following this period of general stimulation comes one of progressive puresis manifesting itself upon the lower portion of the spinal cord, producing a degree of anæthesia sufficient to annul the pains incident to the first stage of labor, and hasten the dilitation of the os when the formation and protrusion of the bag of waters has been insufficient and its presence only adds to the patient's sufferings. It is at this stage that Chloroform should be used for ten to twenty minutes, only to the extent of annulling the sensibilities, so that impressions of pain are but dimly felt. The patient quickly regains consciousness after the withdrawal of the Chloroform, and generally the head will be engaged and the labor satisfactorily terminated. To illustrate, Mrs. J. P. was taken at 6 o'clock a. m. with her fourth labor. I reached the house at 7:30, and on examination found the os dilated sufficient to admit tip of index finger and satisfactorially make a diagnosis of L. O. P. position. Her pains were regular but without producing any perceptible effect upon the os. At 1:30 p. m. I gave Chloroform for ten minutes sufficient to annul the pains, then withdrew it entirely, and on examination a few minutes later had the satisfaction of finding the os dilated and the head engaged.

Just here will say that the negative results so often experienced by physicians in the use of Chloroform is due to the fact that they fail to give a quantity sufficient to temporarially overcome the muscular contractions of the uterus.

The administration of Morphine et Atropine in obstetrical practice is not given, as previously stated, with the view of allaying pain in a diseased condition, but for its hypnotic and soporific effect. The first effect of a medicinal dose of Morphine and Atropine is to moderately excite the circulation, increase the temperature of the skin and agreeably exhilerate the intellectual functions. The stage of excitement is, however, of short duration. The pulse soon sinks below the normal standard, susceptibilities to external impressions is diminished, the faculties of the mind become confused

and consciousness is finally lost in sleep. All the secretions are diminished except that of perspiration, which is hightened; muscular contraction is lessened and in some persons nausea and vomiting are produced and occasionally an eruption of the skin appears.

In the first stage of labor there is usually a high state of tention of the whole system. The patient is tormented with lancing, trasing pains, which renders her exceedingly uncomfortable and adds little to the progress of the case. This first stage may be of only a few hours duration; or it may be lengthened into days if left to take its course, exerting all the while a deleterious effect upon the patient, exhausting force that should be held in reserve whether needed or not for a later stage of the confinement.

By the hypodermatic use of Morphine and Atropine Sulphates, "and that is the method of administration to be preferred to all others, as its effect can be better and more accurately governed and is not so apt to interfere with the stomache," we relieve the patient of the train of symptoms mentioned, and if labor has indeed begun hastens the dilitation of the os by its soothing influence on the muscular fibers of the cervix. Should it happen, and it sometimes does, that we are called to attend a lady who, from an idiosyncrasy, cannot tolerate Morphine at all we are not yet powerless for good to the sufferer who has entrusted her accouchement to us, but can resort to Chloroform as an equally safe and reliable agent.

But it often becomes necessary, in fact it is rather the rule than the exception, that Morphine should be resorted to before Chloroform is given, for the reason that most cases will yield absolutely to Morphine alone, and again there are cases where it becomes necessary to relieve the patient of her sufferings and assist dilitation without producing even a degree of Chloroform narcosis, which is sometimes objected to by the patient and friends and is given with a degree of trepidation by some physicians.

As previously stated, the secondary effects of Morphine et Atropine upon the system is relaxing and soothing. This effect is more forcibly demonstrated upon the healthy subject than one that is diseased. In diseased conditions the administration of Morphine in order to accomplish the purpose of its administration, there is a pathological state to first be influenced before the patient can experience that degree of relief which all sufferers call for.

In a case of confinement we will presume that the patient is in a physiological condition. Hence, instead of perverted physiology to be influenced by this soporific agent its effects can go direct through the nervous system to the organic muscular fibers of the cervix and dissipate state of suffering which often preys upon the physician's feelings of sympathy for his patient and causes him to wish there was something he could do to ameliorate the sufferings of the agonizing women and not interfere with the progress of the labor. At this stage if a hypodermic injection of Morphine sulph., gr. ¼ and Atropine, gr. $\frac{1}{150}$ to $\frac{1}{100}$ be given you will be delighted to see your patient fall into a quiet slumber and remain comparatively comfortable for an hour or more. and on awaking you will find the os, which, previously to giving the Morphine and Atropine, was thick and rigid, is now soft and dilatable, and so soon as the pains return the head will engage and the labor be terminated in a much shorter time than was expected, and with a great deal less suffering than if the case had been left entirely to nature. Should the case be a primepara and the soft parts do not yield satisfactorily you have paved the way for Chloroform and the forceps.

Case 2d.—Mrs. W. was taken at 12 m. with her second labor. I saw her at 3 p. m. and found her pains regular and of the agonizing kind ; os open sufficient to admit tip of index finger. The pains continued regular without any progress towards a termination. At 5 p. m. I gave Morphine ¼ and Atropine $\frac{1}{100}$. After a few hours good rest the pains returned, the os dilated and she was delivered in twenty minutes with much less suffering than in her previous labor.

In the third instance; when the combined effect of Chloroform and Morphine are required we have a class of cases that of all are the most annoying to the physician. Labor will apparently be established, and we will be kept for hours away from other practice unless aided by some remedy that will dissipate the sound of a premature alarm, and sometimes in the midst of surroundings that is anything but congenial to good sleep and the saturation of an aching void which a good repast can only fill. And though I do thus speak it is not with any degree of disparagement, for the poor have as high a claim upon our services as the most affluent, and if we are the true disciples of Æsculapius we will lend a sympathising ear to their pathetic appeals and give them the benefit of our knowledge as well as save ourselves much needless annoyance.

In the combined use of the two drugs mentioned we have at our command agents equally patent for evil as well as for good, but it is to be supposed that no one will enter upon the duties of an accoucheur until he has fully acquainted himself with that much of his profession, and will be able on short acquaintance with the case before him to properly use the remedy at his command.

Having previously noticed some of the physiological effects of Chloroform and Morphine, the class of cases in which their combined use becomes necessary can be better demonstrated by reference to my case book.

Mrs. Mc. A. was taken with her second labor January 9th at 8 a. m. I visited her at 9 a. m. and found all the evidences of labor present except dilitation of the os, pains regular and of the kind that rendered her exceedingly uncomfortable. Having some doubt as to the reality of true labor, I gave Morphine ¼ gr. and Atropine $\frac{1}{120}$ gr. subcutaneously. This dose dissipated her suffering entirely and she passed a comfortable afternoon and night, having no need for me till next day. There being a repetition of her pains and no change in the case I repeated the dose of day before. At 7 p. m. I was called again and found, on examination, that the os was dilated to the size of a fifty cent piece, very thick and unyielding. Recognizing that true labor had indeed set in I purposely waited an hour or more to see what effect her pains would have, which were regular and strong. After fully satisfying myself that there was nothing to be gained by waiting on nature, I gave Chloroform for fifteen minutes—five minutes of the time to the extent sufficient to suspend consciousness. At the expiration of twenty minutes the os was dilated and the head engaged, and in fifteen minutes more the child was delivered with but little knowledge of suffering to the patient.

I could cite a number of similar cases where Chloroform and Morphine was used separately and combined, but will not thus consume your time. In the use of Chloroform and Morphine in the first stage of labor, we have at our command resources which, if properly and intelligently used, will greatly ameliorate the martyrdom of the first stage of labor.

Please notice the advertisement of the Columbia Chemical Co. of 90 So. 5th Ave., New York. Their announcement is very important to the profession, and we hope that our readers will examine it carefully.

Cardine, the Extract of the Heart—Its Preparation and Physiological and Therapeutical Effects.

BY WM. A. HAMMOND, M. D., SURGEON-GENERAL U. S. ARMY (RETIRED LIST).

In continuation of the article on Certain Organic Extracts, etc., which appeared in the New York Medical Journal for January 28, 1893, I have to submit the following remarks on the subject of cardine, which, as the name imports, is the extract of the heart, and in this instance of the heart of the ox. I have experimented with the heart of the sheep, the dog, and the common fowl, but that of the ox has afforded the most decided physiological effects, and is therefore to be preferred. So far as I am aware, no such preparation as the one I am about to describe has yet been used in medicine, nor has the organ, to my knowledge, been employed for the treatment of disorders of the heart unless, perhaps, by the German physician of some forty years ago to whom I alluded in my previous communication as having proposed to cure diseases of the various organs of the body by causing the subjects of them to eat the corresponding organs of animals. As I then stated, my reference is entirely from memory of what I had read in medical journals at about the time of the publication of his essay.

Cardine, as used by me, is prepared as follows: One thousand grammes of the finely minced fresh heart of the ox, previously well washed in a saturated solution of boric acid, are submitted to the action of a menstruum consisting of twelve hundred grammes of glycerin, one thousand grammes of a saturated solution at 60° F. of boric acid, and eight hundred grammes of alcohol. These proportions are the result of a large number of experiments and are those, I think, which are most efficacious in extracting from the heart its peculiar principle.

The mixture is made in a strong porcelain, glass, or glazed earthenware jar provided with a closely fitting cover, and every day for a period of at least eight months—and I am disposed to think that a year is preferable—the mixture is stirred and the heart substance subjected to strong pressure with a boxwood masher, such as is used in the preparation of certain vegetables for the table. If a much less period than eight months is given to the process of maceration the process is inefficient, and indeed, as I have said, it is better to let the extraction go on for a much longer period.

Experiments that I have made with the freshly expressed juice of the heart, either pure or in combination with glycerin or alcohol in various proportions, show that it is absolutely without physiological or therapeutical influence other than that of the transitory stimulating effect of the alcohol when the proportion of this substance is great.

At the end of the period of maceration the supernatant liquid is poured into the upper receptacle of a porous stone filter and allowed to percolate through into the lower vessel. The finely comminuted heart substance remaining is subjected to very strong pressure in a metallic press and the resultant juice also poured into the filter. The filtration is a very slow process, the solution of the heart being even more refractory than that of the brain and other nervous structures, and several weeks are required for the completion of the process. Percolation through filtering paper will not answer.

As thus prepared, the solution of cardine is a clear, transparent liquid of a pale straw-color, with the specific gravity of 1·070. Under the microscope it exhibits no morphological constituents; it does not change, so far as I am aware, under any ordinary circumstances, and no bacteria possess sufficient vitality to exist in it. It is perhaps better, however, that it should be kept in a cool place in well-stoppered phials.

I have said that it is unchangeable under ordinary circumstances, but occasionally when the phials containing it have been subjected to extreme variations of temperature and to agitation, about two per cent. of them will exhibit a slight flocculent precipitate which is albuminous in character. When this occurs, filtration through Swedish filtering paper or through a funnel, the throat of which is closed with absorbent cotton, suffices for its removal. The remaining liquid, under these circumstances, loses none of its properties.

Of course the most rigid antiseptic precautions must be taken in the preparation of this and all the other animal extracts which I have used. It must be borne in mind, however, that as the extract is to be injected into the blood, the substances employed for the prevention of septicism must be such as are not deleterious to the human system or which of themselves have any marked or positive physiological effect. Carbolic acid and corrosive sublimate, therefore, are out of the question. Heat and boric acid I

have found to be entirely efficacious, and the latter, forming as it does one of the constituents of the mixture, is especially eligible.

A great many experiments were required in regard to the dose of cardine to be hypodermically administerd, and it is therefore necessary to insist upon a due observance of the proportions of the various substances entering into its composition being strictly adhered to. Regard must also be paid to the period of time during which maceration is continued. Thus action for a month or two produces a liquid which contains such a small amount of the essential principle that it is almost, if not entirely, inert. Maceration for six months results in a product the effects of which are perceptible, but of which the dose must be fifteen or twenty minims, and even then the physiological and therapeutical influence is feeble. After eight months, however, the action is much more decided, and five minims hypodermically injected is a good average dose for an adult, some persons requiring a minim of two more, while with others a minim of two less suffices. I have arranged the dose after many experiments upon healthy men and women of average size, and have accordingly fixed upon five minims as the proper dose of cardine after a maceration of from four to ten months.

I cannot too strongly insist upon proper filtration of cardine, as well as of all the other animal extracts obtained by my process. It is absolutely essential that no morphological matter should be present in the liquid used for hypodermic injection. If this precaution is not observed, abscesses, and even more serious disturbance, will most certainly follow. After proper preparation cardine is, as I have said, absolutely fatal to bacterial life. At the time of injection it is well, though not essential, to add to the quantity used a like amount of sterilized distilled water. I say sterilized, for, although I am sure that bacteria will not live in pure cardine, they may be able to live in it when it is diluted with water.

The physiological effects of cardine, in their order of occurrence, as nearly as I can arrange them, are as follows:

1. Within ten minutes the pulse becomes fuller, stronger, and sometimes more frequent. The sphygmograph shows this very clearly.

2. The tracings show what is also evident from a digital examination of the pulse—that the arterial tension is augmented.

3. Increasing, as cardine does, the heart pressure, the effect upon the kidneys follows as a logical consequence. Many observations, made as far as possible under exactly similar conditions, establish the fact that the amount of urine daily excreted is increased by from ten to eighteen ounces.

4. The number of red corpuscles in the blood is increased by the use of cardine.

Thus I found that in a woman in good general health and development the number of red corpuscles, as determined by the hæmocytometer, was four million three hundred thousand to the cubic millimetre. After two hypodermic injections of cardine daily for five successive days the number of red corpuscles had increased to four million eight hundred and twenty thousand. By means of the hæmometer similar results were obtained, the degree of coloration being 83° before the injection of the cardine, while after the use of this substance, continued as in the previously mentioned experiment, it rose to 96°.

Many experiments of like character have led to similar conclusions. Indeed, I know of no fact more definitely established than this of the effect of cardine upon the composition of the blood.

My object in the present communication is mainly to show the physiological effects of cardine, leaving to the intelligent physician the office of drawing his own deductions as to its therapeutical uses. It is clearly a heart tonic of great power, a diuretic of notable value, and an agent capable of exercising a marked effect over the composition of the blood.

In cases of cardiac weakness, from whatever cause it may arise, cardine is of inestimable value. It appars to me, from the few cases in which I have employed it in this connection, to be useful in fatty degeneration of the heart, improving the nutrition of the organ not only by its action on the blood, to which I have made reference, but by its effects on the nervous organization of the cardiac tissue.

In one patient under my charge—a gentleman from North Carolina in whom the pulse was, while he was in a state of rest, only 40 in a minute, and in whom the heart impulse was exceedingly weak, and in whom also there was an anasarcous condition of the feet and legs—cardine, in five minim doses administered hypodermically twice daily, began at once to exercise a beneficial effect.

The pulse rose to 64 and occasionally to 70 in a minute. The heart-beat was increased in force, the amount of urine augmented, the dropsy of the extremities disappeared, and this after about a month's treatment. Six weeks have elapsed and this good condition continues in every respect. That it will remain as at present without further treatment is perhaps scarcely to be looked for, but I think this result is quite within the range of possibility; and should the symptoms recur, I have no doubt that cardine will prove equally effectual as in the first instance.

In another case of a gentleman in whom, from the excessive use of tobacco, the heart rythm was intermittent and otherwise irregular, this condition disappeared after a treatment of only four days' duration, and the patient has now a heart apparently as sound as it ever was.

But I have employed cardine more frequently in those cases of nervous prostration attended with anæmia and sometimes chlorosis. In such patients its action is so prompt and effectual as to excite surprise in all who have witnessed the change. In all these cases I have verified the great improvement in the appearance and apparent condition of the patients by the use of the hæmocytometer and hæmometer. In mild cases a week or ten days' treatment has been sufficient, but never more than four or five weeks.

A distinguished physician from the Dominion of Canada consulted me in January last for great cardiac irritability, the result of overwork, both professional and political. I treated him for two or three days with hypodermic injections of cardine, and the result was in the highest degree gratifying. The attacks of vertigo from which he had suffered, and which were clearly the result of weak heart, entirely disappeared. He returned home and entered at once with energy into an exciting political campaign, from which he emerged successfully after making over one hundred speeches. He writes me that he endured this tremendous exertion without discomfort, and that the cardine worked wonders with him.

In a similar case, that of a prominent physician of Indiana, the heart-beat was feeble and irregular, and there was constant vertigo while walking, or even while in a standing position. In this case the relief was equally prompt. He remained under my care only three days, being summoned home by telegram by sickness in his family, after making arrangements to procure a sufficiency of car-

dine for home use, and I advised him to continue it for at least a month. He arrived home before the cardine reached him, and, feeling the need of it, he at once telegraphed for it to be sent to him as soon as possible. He informed me that the effect upon him was so decided that, whereas formerly he was loath to walk even a few steps for fear of being overpowered by dizziness, a single injection enabled him to walk as much as he pleased for four or five hours afterward.

Of course it is too soon to fix definitely the therapeutical value of cardine, or, in fact, of any other of the animal extracts made by my process. There is danger that over-enthusiastic and inexperienced or ignorant persons will claim too much for them. Already I see that they are spoken of in various quarters as "elixirs of life," and that absurd stories are told of their power. No one person can be expected to determine the value of these extracts. That must be done by large numbers working toward the same end and for long periods. I do not even pretend to assert that there may not be some better method of extracting the active principle of the several organs of the body which I have subjected to experiments. I only say that I have labored more than three years in the attempt to find the best method and that my experience should go for something, and I feel called upon to warn the profession against the crude experiments of sciolists, who rush in with heavy foot where angels should tread lightly. I have heard of one of these experimenters who makes a mixture of brain substance, glycerin, and phosphate of sodium, and who injects this milky-looking compound into the blood. Of course inflammation ensues, abscesses will probably follow, and even worse consequences are to be feared. Glycerin of itself is not a preservative of the nervous tissue, except for a very short time, whereas I know that the mixture I use will keep it for at least a year and, I presume indefinitely.

As to the essential characteristics of cardine, while I am not able to give it a place in the nomenclature of organic chemistry, I am sure, from a consideration of the process by which it is obtained, that it is a substance derived from the heart. There is no escape from this conclusion. As to how it acts, I can at present only call attention to the theory that I proposed in my first paper on the subject, and that is briefly :

That all the organs of the body possess the power, when in a

state of health, of secreting from the blood the peculiar substance that they require for their nutrition, and that they take this substance and no other, never making a mistake in the matter. The brain separates brain substance; the heart, heart substance, and so on. If through disease or from derangement of function they lose this power, or if the peculiar pabulum they require be not in the blood in sufficient quantity, their functions cease to be normal. General debility, producing a diminution of nerve force, may cause the loss of this power, or it may result from local disturbance either of structure or function, or some profound shock to the organism may so interfere with hæmatosis that the blood no longer contains the material which the organ needs. In either case, if we supply to the blood the peculiar principle which a diseased or disordered organ requires, we do that which Nature, unassisted, can not or does not do.

Cardine, therefore, if this theory of its action be correct, nourishes the heart. It is the substance which an ill-conditioned heart must have for its well-being. It is already in a fit form for assimilation, and it acts with a promptitude, a certainty, and a degree of permanence of which no other heart tonic within my knowledge is capable.

It follows also that in all weak conditions of the system, and especially in those in which the blood is below the normal standard, cardine must prove to be of inestimable value. And in other and more serious affections, such as those in which depurative organs of the body, especially the kidneys, fall below the healthy standard of functionation, cardine, increasing as it does, the heart pressure, may augment the bodily comfort and materially prolong life.

Cardine is not an annihilator of the influence of old age, but my experience convinces me that it lessens the effect of this factor of deterioration so far, at least, as the heart is concerned. This organ, as is well known, is one of the first to fail in physiological power, and this is shown not only by the examination of the pulse and of the heart itself, but by the accumulation of fluid, especially in the lower extremities, owing to a diminution of the heart pressure. Cardine, taken in conjunction with cerebrine, assuredly counteracts this influence, for, owing to the increase of the cardiac pressure, the passive anasarcous condition disappears, and the other

indications of heart weakness are either greatly mitigated or altogether abolished. How long this power will remain in any particular case I am not at present able to say, but I know that a daily hypodermic injection continued for six months does not yet reveal any sensible loss in its influence.

Dosimetric Medication.

A Paper Read Before the Academy of Medicine, October 17, 1892.

By John M. Shaller, M. D., Professor of Physiology and Histology in the Cincinnati College of Medicine and Surgery; Professor of Physiology in the Ohio Veterinary College.

For a long time I have been dissatisfied with the many evils attendant upon prescription writing, but hesitated to assume the many inconveniences of dispensing medicines, until I could learn of some simple and effective method. The following occurrence precipitated my hesitancy. The case was one of influenza in an adult, whose temperature was 105° and whose pulse was 120 and full, skin hot and dry. I prescribed antifebrin, one drachm, to be divided into eight powders, one of which was to be administered every three hours until some improvement was manifested. After the second dose had been taken, I was summoned and found my patient in a state of great anxiety, complaining of severe pain about the heart; skin cyanosed and clammy, and pulse feeble. She said that the second powder was twice the size of the first, which remark led me to have the remaining six powders weighed; and imagine my surprise when I learned that they weighed thirty-nine grains, which allowed twenty-one grains for the first two powders, and, as the second *seemed* to be twice the size of the first, the inference to be drawn is, that it must have weighed fourteen grains. The error was a serious one, but fortunately the patient made a fair recovery.

Such carelessness on the part of druggists should not be tolerated. How many such errors, probably fatal ones, are never discovered! To prevent such carelessness and mistakes there is but one effective recourse; we *must* dispense our own medicines.

About this time I received a few samples of dosimetric granules, which I very soon tested. The case was one of cholera infantum in a child of eight months, who had had thirty watery, colorless stools in the preceding twenty-four hours, with frequent vomiting and continuous crying. I must confess that it was with a feeling

of great hesitancy, and, with the belief that I was losing valuable time in a serious case, that I gave the patient $\frac{1}{1000}$ grain doses of arsenite of copper every fifteen minutes. After a few doses the vomiting ceased, the pain gradually subsided, the stools became less frequent, and in the course of a few days the child was well. The results were so satisfactory that I sent for literature upon dosimetry, and ordered a supply of granules.

What is dosimetry? It is a method of therapeutics the salient feature of which is the administration of the active principles of plants, and other medicines, in granule form, in small doses frequently repeated, in obedience to certain simple rules advanced by the author. "The granules contain accurately weighed quantities of simple substances whose chemical composition is invariable, and whose effects are always the same." Dr. Adolph Burggraeve, for many years surgeon-in-chief to the hospital of Ghent, is the author of this method. After prescribing the usual forms of medicine for over forty years, he conceived the idea of using the active principles of plants and other medicines, in granule form, and according to the activity of the medicament, each granule containing $\frac{1}{134}$, $\frac{1}{67}$ or $\frac{1}{6}$ of a grain. In each disease he distinguished two periods: dynamic, presenting only functional disturbances, and organic, accompanied by a change in tissue. "It is in the first period that the physician should use the most active means possible to jugulate the disease, or cause it to abort." The fundamental law promulgated by the venerable author is that, "Dosimetric medicine rests essentially upon its power to jugulate those fevers in which acute maladies have their commencement."

As a rule, physicians are not ready to believe that fevers can be aborted, but hold that they must run their course. All physicians have had patients presenting prominent symptoms of typhoid fever, in which the fever lasted but two weeks, or less. In such cases the belief was that there must have been a mistake in the diagnosis. Even ten or fifteen years ago, when cases presenting the prominent symptoms of phthisis pulmonalis were cured, the belief was that there must have been a mistake in the diagnosis. The same is true of cancer, and will be true of other diseases. Our ideas are changing; they will continue to change, and many pet theories which we to-day look upon as being the very foundation-stones upon which our noble science rests, will crumble to dust, only to

be replaced by others seemingly plausible, which in their turn must follow their predecessors.

In all acute diseases when fever first makes its appearance, "the defervescent alkaloids" aconitine, digitaline and veratrine are given either together or singly, every fifteen minutes, every half hour or hour. Fever exists, that is sufficient; let it terminate into whatever disease it may, valuable time is gained by treating this primary fever, *beginning early*, before positive signs enable us to make a positive diagnosis. The congestion which always precedes inflammation *may* be reduced, and consequently the threatened disease aborted. Can you conceive of an acute disease with a local inflammation somewhere, without there having been a primary congestion? Why wait for the inflammation which gives positive signs for a positive diagnosis? Fight this primary congestion with those remedies which will divert the blood from the congested area to the capillaries of the skin and mucus membranes, increasing all of the secretions, and thereby prevent a great rise of temperature. It may be necessary to keep up this treatment for many hours; but, by perseverance, continually diverting the blood from the threatened organ or tissue, one may, in the majority of cases, if commenced early enough, relieve the congestion, prevent an inflammation, and abort a disease. In malarial diseases a congestive chill may be aborted by the hypodermic injection of $\frac{1}{50}$ of a grain of atropia, by diverting the blood from the threatened organ to the skin. No doubt acute inflammatory diseases may be aborted by similar means.

Another feature of this method is that of the "dominant treatment." Never lose sight of the cause and tendency of a disease. If a disease is produced by germs, and the tendency is septicæmia, saturate the blood with some antiseptic, as calcium sulphide; give it from the beginning and throughout the course of the disease. In diphtheria, where the tendency is to paralysis as well as septicæmia, strychnia and calcium sulphide should be administered until the patient is free from danger. In capillary bronchitis, where the disease terminates so frequently in paralysis of the respiratory muscles, strychnia must be given from the onset of the attack and throughout the entire course of the disease, the object being *to prevent paralysis*, and not wait until it has appeared; it may then be too late for remedies to act. In typhoid fever sulpho-

carbolate of zinc must be continually given during the course of the disease, aconitine in granules containing $\frac{1}{1\,8\,4}$ of a grain every half hour, for several doses, and every hour for days, without evil results. To children a few months old I have administered broken doses of aconitine and hyoscyamine, always with good results; but I am willing to confess the first time I did so it was with a feeling of uneasiness.

I have since gained confidence in the use of these small doses frequently repeated, because the results have always been most happy ones. With confidence in the diagnosis, and knowing the physiological action of the medicine, and the proportionate dose, there need be no hesitancy. It is impossible to know what amount of the remedy will be needed to control any particular symptom; therefore give small doses frequently repeated, and when prompt action is needed the granules should be dissolved and administered in hot water or given hypodermically.

The third and last feature of this method is that of administering effervescent seidlitz salts. This salt is *the cathartic* of dosimetry, and is composed of pure anhydrous sulphate of magnesium, made effervescent by the addition of bicarbonate of soda and citric or tartaric acid. In all cases of fever it is given as a refreshing morning draught, in doses of one teaspoonful in a glassful of water, the object being to produce a slight action upon the bowels and kidneys. Taken thus early in the morning in acute and chronic cases, while the stomach is empty, it removes the mucus, promoting thereby the more rapid and certain absorption of the medicine. In summer complaints of children, it is an easy and pleasant way to unload the bowels of their indigestible and fermenting contents.

I shall now mention a few of the granules (*) and the doses in which they may be obtained, solely for the purpose of showing the character of the medicament employed.

Granules containing $\frac{1}{1\,0\,0\,0}$ grain: hyoscine, copper arsenite; containing $\frac{1}{5\,0\,0}$ grain: aconitine, atropine sulphate, strophantine; containing $\frac{1}{2\,5\,0}$ grain: copper arsenite, glonoin, hyoscyamine, gelseminine; containing $\frac{1}{1\,8\,4}$ grain: aconitine, cicutine, colchicine, lobeline, strychnine, veratrine, brucine, mercury bichloride; containing $\frac{1}{6\,7}$ grain: apomorphine, emetine, calomel, codeine, tartar

*These granules are purchased of W. C. Abbott, of Ravenwood, Chicago, Ill.

emetic, morphia sulphate, mercury biniodide, scillitine, quinine, quassin; containing $\frac{1}{6}$ grain: calomel, camphor monobromide, ergotine, bismuth, pepsin, tannin, iodoform, podophyllin, salts of calcium, soda, iron, lithium, quinine, zinc.

These granules represent the minimum adult dose, and can be given every fifteen, thirty, or sixty minutes, according to the emergency of the case. Of the active alkaloids single granules should be given, but the great majority of the remedies can be administered in doses of several granules each. Ocular demonstration shows that these granules are very readily dissolved. Their solubility is also proven by the rapid relief obtained when administered in acute cases. The medicine being pleasant to take, producing no nausea, the dose being small, and the drug pure, it enters the blood rapidly and readily, and relieves the symptoms before marked physiological effects are produced, which physiological effects must precede poisoning. Instructions are always given to stop the administration of the remedy as soon as relief is obtained, thus preventing any serious effect from the medicine.

Those who have been able to watch the progress of dosimetry claim that *no case of poisoning* is known to have occurred by the use of these granules. I *had* always regarded the active principles as a dangerous class of remedies, and this, I believe, is shared in common with other physicians, for I have been frequently asked: "Are you not afraid to use the alkaloids?" I can unhesitatingly answer no, because when cautiously given they are harmless and productive of most beneficial results. The granules are not subject to changes, as are the tinctures and fluid extracts, which may have for months been exposed to heat, cold, sunlight and, possibly, evaporation; and who can say how much of the active medicinal principle is contained in such preparations?

Why are hyoscyamus, digitalis, aconite and belladonna given in disease? Because they contain as their active medicinal principle alkaloids or glucosides. We do not hesitate about the administration of these crude drugs, nor can we say how much of the active principle is contained in a given dose, and yet, if it were not for the fact that these plants contain active principles physicians would not use them. When the active principle is extracted from the plant, inert matter is expunged, and a very small particle represents the medicinal strength of a large amount of crude drug.

This concentration of the medicinal strength, strange to say, actually inspires physicians with fear, because of the smallness of the dose; and they insist upon burdening the system with a large amount of inactive and useless matter, in order to give a minute portion of the active principle. Some plants contain several alkaloids, and the full medicinal effect can only be produced by the administration of the crude preparation, but, in the vast majority of cases, the desired result can be had by the administration of the active principle representing the plant.

In Billing's "National Dictionary," aconitine is stated to be "always unsafe for internal use," and the dose given is "$\frac{1}{400}$ to $\frac{1}{200}$ of a grain." I have given aconitine in granules containing $\frac{1}{1\,3\,4}$ of a grain every half hour for several doses, and every hour for days, without evil results. To children, a few months old, I have administered broken doses of aconitine and hyoscyamine, always with good results; but, I am willing to confess, the first time I did so it was with a feeling of uneasiness.

I have since gained confidence in the use of these small doses frequently repeated, because the results have always been most happy ones. With confidence in the diagnosis, and knowing the physiological action of the medicine, and the proportional dose, there need be no hesitancy. It is impossible to know what amount of the remedy will be needed to control any particular symptom, therefore, give small doses frequently repeated; and when prompt action is needed the granules should be dissolved and administered in hot water, or given hypodermically.

I desire to make mention of a few remedies which I have found to be very useful in certain disorders. In cholera morbus and cholera infantum, and in all diarrhœal disturbances produced by fermentation, sulpho-carbolate of zinc is the remedy above all others of its class. When pain accompanies the above-named diseases, codeine or hyoscyamine will relieve the colic. Sulpho-carbolate of zinc and codeine in ½ grain doses, given every half hour will soon give relief, or hyoscyamine $\frac{1}{200}$ of a grain every half hour will be equally effective and without bad after effects. Uterine colic from suppression of menses yielded after the second dose of hyoscyamine $\frac{1}{250}$ and macrotin ⅙ grain, given a half hour apart. Lumbago yielded rapidly to veratrine $\frac{1}{134}$ grain, colchicine $\frac{1}{134}$ and macrotin ⅙ grain, given together every hour. Several cases of

pertussis improved rapidly under calcium sulphide and monobromide of camphor, ⅙ of a grain each, given every two hours. Acute cystitis improved rapidly under hyoscyamine $\frac{1}{250}$ grain, aconitine $\frac{1}{134}$ grain and lithum benzoate ⅓ grain, given every hour. Hyoscyamine has largely replaced the opiates in my practice. In all cases of spasmodic action of the hollow viscera, hyoscyamine and strychnine will produce relief very rapidly, without any evil after effects, and usually after the pupil is dilated.

These illustrations can be multiplied, but I hope at some future time to give more in detail the action of these granules. It is not necessary in the use of these granules to follow wholly the teachings of Burggraeve. The remedies are the same that we have been in the habit of using, some are changed only from the cruder drug to the pure, active principle. In selecting dosimetric granules for dispensing, I was led to do so, not from any theory of the author, but simply on account of the convenience of form, the purity of the medicine, and the accuracy of each dose. Prescribed rules eannot be followed and applied to every case; the judgment must at all times be used; there are indications and contra-indications, and the physician must know how to discriminate and what to apply. In many cases I have applied the precepts as taught by Dr. Burggraeve, and the excellent results which have followed this practice have surprised me. Never before, in fourteen years of practice, have I been so thoroughly satisfied as with results obtained by these granules. The doses seem small, but frequently repeated prove more satisfactory than larger ones given at greater intervals. Of course there are exceptions; for in insomnia and night sweats, single large doses are undoubtedly the best.

Physicians have often asked me if I charge for the medicine. I do so because the medicine must be purchased, and in dispensing it there should be reimbursement. The homœopaths do not charge for their pretended medicines, and I really do not understand how they *could* conscientiously charge something for absolutely nothing. The following occurrence, which I have from good authority, illustrates this point: A homœopathic physician was called to prescribe in a case of fever in an adult. He put one drop of the tincture of aconite into a goblet of water and vigorously stirred the water, not altogether for the purpose of thoroughly mixing this solitary drop with the water, but believing by some mysterious way

to increase the power or potency of the aconite. The goblet was emptied of its contents and refilled with water, and again vigorously stirred to increase the potency of the highly-diluted medicament. Then the contents of the goblet were thrown away for the second time and again refilled, and once more vigorously stirred. This time, however, the precious infinitesimal dilution was allowed to remain in the goblet and the patient directed to take a teaspoonful every hour, with *extra precautions*, I suppose.

Is there any advantage in the use of dosimetric granules over compressed tablets? In dosimetry the granules represent a single medicine, and the physician who at the bedside recognizes the needs of his patient can readily make such combinations as he may desire. With the tablets the ingenuity of the manufacturer has been strained to a degree that is highly enterprising in his supreme effort to unite in one tablet all the medicines of each class. It is the old shot-gun method, with which almost any one, no matter how poor his aim, can get in at least one shot out of a handful. One tablet has ten shots in it, and a number have seven or eight. The tablets are elegant in appearance, and, no doubt, efficacious; the compound ones must be. But it appears to me if, a physician is sure of his case, and knows his aim, one or two drugs carefully selected will be all that is required. The administration of these manufactured compounds *is not the ideal medication.* The granules are much smaller than the tablets; a greater number can be carried in a small compass; they are more soluable; in price there is no comparison; they are purer, as they represent the active principles of plants, while many of the tablets contain the cruder, impure drug.

I have taken the liberty of presenting before this learned body the general principles of Burggraeve's dosimetric treatment. The excellent results which I have obtained by the use of the granules made me feel that there might be others who, disgusted with prescription writing, were looking about for some effective and convenient form, and to whom I could, without hesitation, recommend that which I have learned by experience to be convenient, pleasing and acceptable to patients, and profitable to the physician.

SALT NATROLITHIC.—The Natrolithic Salt of the Health Restorative Co. is the most pleasant *in action* of any of the saline purgatives.—*The Medical Brief.*

A Contribution to the Study of Cerebro-Spinal Meningitis, Especially its Etiology, with Report of a case following Influenza.

By William Broaddus Pritchard, M. D., Adjunct Professor of Mental and Nervous Diseases in the New York Polyclinic.

Cerebro-spinal meningitis, especially in its sporadic form and as a complication, has long been a sort of etiological enigma in medicine. The symptoms, in both the primary and secondary disease, are well marked and quite characteristic as a rule. The diagnosis is ordinarily, therefore, a matter of no difficulty. An exception to this statement is to be met with frequently in the fulminant form, occasionally in the lighter or abortive forms and rarely in the disease as it occurs in young children. The fulminant cases have been mistaken for apoplexy. The frequent absence of more characteristic symptoms of pneumonia in young children has rendered the diagnosis a matter of some doubt in such cases, and this doubt must exist, at least temporarily, in certain adult cases of pneumonia. Tubercular meningitis presents symptoms which are identical in many respects, if the cord has been invaded by the tubercular process. It is quite difficult to differentiate certain cases of cerebral meningetis of obscure origin from the cerebro-spinal disease. This is not of vital importance, though always desirable. Typhoid fever in certain stages has often been mistaken for the disease in question, and vice versa. The element of doubt is, however, rapidly eliminated, in the future progress and history of the case, in this and other diseases mentioned.

The morbid anatomy is a very constant one if the investigation should be sufficiently extended. Most commonly the meninges are found congested and adherent, and the sub-arachnoid space is seen on superficial examination to be the seat of an exudation of purulent lymph.

The lymph has been found non-purulent in some cases quoted by Trevelyan[1]. These cases were all of several weeks' or months' duration, however, and this fact may afford an explanation of the exception. The nerve substance proper beneath the pia is usually involved. Cases have been reported in which the meninges did not show any gross changes superficially, but in which bacteriological investigation of the fluids made evident the presence of various micro-organisms known to be capable of producing the disease.

As regards the etiology of the epidemic form, we have for a long time possessed many evidences of a presumptive cause in some bacterial micro-organism. Our information, while presumably correct, was largely problematical on this point, however, until the investigations of Weichselbaum resulted in the identification of his diplococcus-intercellularis meningitidis, and the work of Foa and Uffreduzzi in 1886, led to the discovery of their meningococcus (diplococcus lanceolatus). This latter organism was found to possess many points of resemblance to the diplococcus pneumoniæ of Frankel, a fact which was in accord with the clinical observation of an association of pulmonary and cerebro-spinal inflammation frequently seen in sporadic, and occasionally in epidemic cases.[2]

That this micro-organism is a positive etiological factor in some cases of cerebro-spinal meningitis has been quite satisfactorily proven by bacteriological researches in a large number of cases.

Ghika,[3] Sabrazes,[4] Mills,[5] and Comibas,[6] have each reported during the past year cases of cerebro-spinal meningitis of the sporadic type ending fatally, the fluids of the spinal cord and brain showing upon examination the pneumonococcus of Frankel. Many sporadic cases of the disease may be explained in this way therefore, but by no means all, for most careful examination has in several instances failed to show the presence of this micro-organism, notably in cases reported by Oebeke.[7] The affection has been repeatedly observed as a complication of many other diseases besides pneumonia; diseases in which the causative microbe is possessed of attributes quite different from the pneumonococcus. It has occurred as a complication in erysipelas,[8] typhoid fever,[9] endocarditis,[10] measles,[11] gonorrhœa,[12] rheumatism, influenza, and other maladies in addition to those cases which are developed secondarily from the entrance of the ordinary pus germs from suppurating wounds, abscesses, or ear disease, and those which originate in trauma. Adenot[13] has tabulated the various micro-organisms which have been found in the fluids and exudate of the meningeal spaces in cerebro-spinal meningetis as follows: The pneumonococcus of Talamon-Frankel, the pneumobacillus of Friedlander, Weichselbaum's micro-coccus, the steptococcus pyogenes, the typhoid bacillus, the stophylococcus pyogenes and other undetermined microbes. The same writer suggests that while many of these micro-organisms unquestionably have a selective affinity for other fields of ac-

tion than the meninges, they are all capable of manifesting their greatest activity in this locality after once having gained an entrance, indirectly through the blood or lymph channels or directly through continuity or contiguity of structure, as in abscesses. A case in point, illustrating this fact, is reported by Debove,[14] who relates the results of an autopsy upon a patient who died with symptoms of meningitis and peritonitis, the pneumonococcus of Frankel being found in the meningeal and peritoneal exudate, but not in the lungs, which were normal. The factor determining this erratic action in an unusual field is not yet determined. It is probable that a personal equation, in an individual or family predisposition, is of weight, though this has not been proven. The result of the many studies, clinical and bacteriological, which have been made recently as to the etiology of this affection, and which I have partially recapitulated above, indicate that cerebro-spinal meningitis, especially in its sporadic form and as a complication, is sufficiently common to occasion no special surprise should it appear at any time or with almost any microbic disease. That such is the case is confirmed by the statistics of the Bureau of Contagious Diseases in New York City and elsewhere. During twenty-four weeks in the first half of 1892, 106 deaths were officially recorded as due to cerebro-spinal meningitis in this city. The actual total of cases, including recoveries and others not reported from various well-known sources of error and neglect, was probably nearly one-third more, so that the average for the year was perhaps 300. In Philadelphia,[15] from thirty to eighty deaths have occurred annually, for more than twenty years past, according to the official records. Several of the 106 cases in New York City early in 1892 occurred as complications of the epidemic of influenza, at that time prevalent, and one of this character came under the observation of the writer. The history was as follows:

M. K. (Irishman), æt. 29; negative history as to hereditary predisposition or personal illness of importance. February 2, 1892, while at work he had a succession of rigors, with violent frontal headache and backache. He went home and to bed. I saw him the same day. For six days his symptoms were typical of influenza: severe frontal headache, bone and muscle pains, coryza, sore throat, dry cough, slight fever and marked physical prostration. On the sixth day, having meantime shown some improvement, he

became delirious and attempted to get out of bed. This period of active delirium was short, however, and by the next day he was more quiet, but still restless, tossing his head from side to side, muttering in wild delirium, though not unconscious and able to make known his wants and to answer questions. Cerebration was quite slow, however, and his hearing becoming affected early, it became difficult to make him understand. Urine was passed involuntarily. On the eighth day he lay in a partial stupor with head retracted, neck muscles rigid, marked tenderness over cervical and upper dorsal spine, his limbs drawn up in contraction, pupils widely dilated and without reaction to light. The knee jerks were abolished, the superficial reflexes exaggerated and cutaneous hyperesthesia was present everywhere. The bowels were obstinately constipated. The face was alternately flushed and pale. There was no eruption of any kind on the body, except a mild herpes libialis, and a small bed-sore. The temperature (per rectum) varied to a remarkable degree without any apparent cause. At one observation the thermometer registered 104½. The pulse also varied remarkably, ranging from 52 to 110. Careful examinations made repeatedly failed to demonstrate any physical signs of a pneumonia. The condition, as above described, did not vary materially for several days, except that the deafness increased and the patient became totally blind. Opthalmoscopic examination in the prone position was difficult and I was unable to determine positively any changes in the fundus, except an enlarged, tortuous condition of the retinal vessels. There was no convulsion at any time, although during the first twenty-four hours of delirium, a succession of clonic movements or jerkings were observed in the extremities. On the twelfth day of meningitis, or eighteenth of his illness, his temperature was 100, pulse 70, and the patient's condition was one of improvement. This improvement, while slow, was steadily progressive, and on February 27 he was free from fever, quiet and rational. He complained of defective vision and could not well distinguish the members of his household. Deafness was quite marked, being worse in the left ear. He suffered much from a feeling of cramps and stiffness, with numbness in his legs and to a lesser degree in his arms and neck. He avoided all movements involving the spine on account of pain. That was impaired at this time over the dorsal surface of the hands

and feet, though not to a marked degree. Tremor of an ataxic character was marked on extension of the arms and hands. On the thirty-first day he sat up, and on the thirty-third day he attempted to walk, but found his legs would not support him, and he thought the weakness in his legs out of proportion to his general muscular condition. Vision had by this time improved so that he could count the fingers. Hearing had also improved, and the pains and cramps in the limbs had disappeared. Two weeks later he was discharged cured except for slight weakness (paraparesis) and slight deafness, worse in the left ear, which still persists, and is the only evidence to-day of his previous sickness. The treatment observed possessed no novelty which would entitle it to special elaboration. Bromide of potassium and ergot were used freely throughout the attack. The head was shaved and ice applied intermittently to both head and spine. The bowels were kept open with enemata of glycerine and water. Calomel (gr. i.) and Dover's powder (gr. viiss) were used during the first four days at intervals of three hours. Special attention was given from the beginning to the patient's nutrition, some easily digested food being given in small quantities every hour or two. The temperature was controlled by repeated sponge baths with vinegar, alcohol and water. During convalescence, iodide of ammon and iodide of potassium (5 grs. each) were used and daily galvanism to the spine (10 milliamperes) was continued for some time, occasional weaker applications being made to the head.

As regards the diagnosis, while the symptom picture present resembled in some respects the type of pneumonia which was frequently observed as a complication in influenza, the hyperesthesia, rigidity of neck, deafness, blindness and other special symptoms which were present, were quite sufficient to establish the true character of the patient's illness.

Nor is the complication of a cerebro-spinal meningitis with influenza especially uncommon. Similar cases have been reported during the past twelve months by Bolger[19], Prentiss[17], Plummer[18], Sabrazes, Trevelyan and Allyn[19], (three cases)[a] making, with my own, a total of nine cases. Seven of these ended fatally, and in five, autopsies were made. In Sabrazes' case, bacteriological examination showed the presence of the pneumonococcus of Frankel. Allyn's three cases and Trevelyan's case showed characteristic

gross pathological changes, but no bacteriological examination was made. Prentiss' case is reported as one of rheumatic meningitis following influenza. In most of these patients there was apparent recovery from grip symptoms for a day or two before symptoms of meningitis developed. The symptoms, in the main, were similar to those observed in the epidemic variety of the disease. A few modifications were present as follows: In one-third, the disease assumed the fulminant type. The degree of unconsciousness was not profound as a rule in any case until just before death. Convulsions did not occur except in one case (a child). Eruptions of the skin were only present in one or two cases, and were not then conspicuous or of the usual type. The percentage of deaths (about 75 per cent.) was decidedly above the average in the epidemic variety, a statement in accord with statistics as to the greater mortality in sporadic cases. Convalescence was relatively more rapid in the two cases which recovered than in the primary disease, and little, if any, evidence was left in either case of previous illness.

The association of cerebro-spinal meningitis with influenza is one which in the light of comparison as to agencies producing the two diseases, should occasion no surprise. Recent bacteriological research by Kirchner[20], Baillere[21], and Roux and Pitou[22], have shown that the pneumonococcus of Frankel, the encapsulated diplococcus of Jolles and several of the pus bacteria, may all be present in the secretions in influenza. Some of these same micro-organisms have been found in cerebro-spinal meningitis, as stated in the quotation from Adenot, and thus an etiological relationship is established.

Finally, it seems a justifiable conclusion, in view of the numerous confirmatory facts cited, that any micro-organisms capable of exciting an inflammatory action in any tissues or organs of the body, may induce a sporadic cerebro-spinal meningitis and that the disease may occur as a complication in any affection therefore, which has its origin in microbic agencies. This conclusion does not conflict with the assumption of a specific microbe for the epidemic primary disease. That such a micro-organism exists is probably true, but it has not yet been positively proven to be either the diplococcus of Weichselbaum or the "meningococci" of Foa and Uffrediezzi. The factor causing an unusual selection of the meninges by various micro-organisms and resulting in the development

of a sporadic or a complicating cerebro-spinal meningitis is still undetermined.

1 Trevelyan—Brain spring no, '92.
2 Buneberg—Berlin Klin Wach, '88.
3 Ghika—Bull de la Soc. Anat. de Paris, Fox, 3 Feb. '92.
4 Sabrazes—Journal Med. de Bordeaux, Nov. 29, '91.
5 Mills—Bruxelles Jour. de Med., July 16, '92.
6 Comibas—Journal de Med., de Paris, June 5, '92.
7 Oebeke—Berlin Klin Wach, April 1, '91.
8 DeCazel—Le Semaine Med. Jour., Jan. 15, '88.
9 Roux—Lyons Medical, July 15, '88; Freyham—Deutsch Med. Wach, Aug. 2, '88
10 Nauwerk—Deut. Archio f. Klin. Med., '81.
11 Ulrich—Johrbach f. kind. u. Physiche Erzichung, vol. 6.
12 Steinon—Brux. Jour. de Med. de Chir. et de Phar., Feb. 27, '92.
13 Adenot—Gaz. des Hopit., Paris, June 28, '92.
14 Debove—La Trib. Med., May 22, '90.
15 Medical News, March 10, '88.
16 Bolger—British Med. Jour., May 7, '92.
17 Prentiss—Medical News, Aug. 29, '91.
18 Plummer—British Med. Jour., Sep. 10, '92.
19 .a Allyn—Medical News, May 14, '92.
20 Kerchner—Zeitschruf. f. Hgy. u. Infectious K., Dec. 29, '90.
21 Baillere—Lyons Med., June 7, '91.
22 Roux and Piton—Lyons Med., Sept. 20, '91.

An Attack on the Morality of Chattanooga Physicians.

The Rev. Dr. J. P. McFerrin, of Chattanooga, Tenn., has created a decided sensation in medical circles in that city. During his sermon, in referring to the immorality existing in the city, the "Rev." said that "most physicians' offices in that city were regular places of assignation. That no matter what illness or complaint befell women, it was only when death was imminent that a male physician should be permitted to examine them, and then in the presence of some other member of the family." The Chattanooga Medical Society has called a special meeting to take action in the matter says a cotemporary. The good and truly holy "Rev." should consider the failings of his own cloth before animadverting upon those of physicians.

The wife of Koch, the bacteriologist, has secured a divorce, with alimony to the extent of one-fourth his income. He is to marry a young actress now playing at Barany's theater.

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Containing the Essential Elements of the Animal Organization—Potash and Lime;

The Oxidising Agents—Iron and Manganese;

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And the Vitalizing Constituent—Phosphorus; the whole combined in the form of a Syrup with a **Slightly Alkaline Reaction.**

It Differs in its Effects from all Analagous Preparations; and it possesses the important properties of being pleasant to the taste, easily borne by the stomach, and harmless under prolonged use.

It has Gained a Wide Reputation, particularly in the treatment of Pulmonary Tuberculosis, Chronic Bronchitis, and other affections of the respiratory organs. It has also been employed with much success in various nervous and debilitating diseases.

Its Curative Power is largely attributable to its stimulant, tonic, and nutritive properties, by means of which the energy of the system is recruited.

Its Action is Prompt: it stimulates the appetite and the digestion, it promotes assimilation, and it enters directly into the circulation with the food products.

The prescribed dose produces a feeling of buoyancy, and removes depression and melancholy; *hence the preparation is of great value in the treatment of mental and nervous affections.* From the fact, also, that it exerts a double tonic influence, and produces a healthy flow of the secretions, its use is indicated in a wide range of diseases.

NOTICE -- CAUTION.

The success of Fellow's Sprup of Hypophosphites has tempted certain persons to offer imitations of it for sale. Mr. Fellows, who has examined samples of these, **finds that no two of them are identical,** and that all of them differ from the original in composition, in freedom from acid reaction, in susceptibility to the effects of oxygen when exposed to light or heat, in **the property of retaining the strychnine in solution,** and in the medicinal effects.

As these cheap and inefficient substitutes are frequently dispensed instead of the genuine preparation, physicians are earnestly requested, when prescribing the Syrup, to write "Syr. Hypophos. **Fellows.**"

As a further precaution, it is advisable that the Syrup should be ordered in the original bottles; the distinguishing marks which the bottles (and the wrappers surrounding them) can then be examined, and the genuineness—or otherwise—of the contents thereby proved.

Medical Letters may be addressed to

Mr. FELLOWS, 48 Vesey Street, New York.

Charlotte Medical Journal.

E. C. REGISTER, M. D., J. C. MONTGOMERY, M. D.,

Editors and Publishers,

No. 36 South Tryon Street, Charlotte, N. C.

SUBSCRIPTION, $2.50 PER YEAR.

Articles intended for the Original Department of the Charlotte Medical Journal will be accepted only with the understanding that they are contributed to it exclusively.

THE Woman's Medical College of Baltimore graduated this session nine women. Among the number only one "Mrs." appeared.

DR. JNO. F. REED, of Concord, N. C., called at the Journal's offiee a few days ago. At an early day Dr. Reed will locate in New York City for the practice of his chosen profession.

THERE were 2,300 medical students in New York during the past session, three-fourths as many in Philadelphia and one-fourth the number in Chicago. Truly this is a land for medical students. We lend a hand of sympathy, kind friends.

THE Boston Medical and Surgical Journal reports a marriage of what might be termed "heavy weights." There were recently married at one of the dime museums a couple whose united weight is said to be 1,179 pounds, the bridegroom weighing 607 pounds, and the lovely bride 572.

A COMPLIMENT TO DR. J. P. MUNROE, PRINCIPAL OF THE DAVIDSON, N. C., SCHOOL OF MEDICINE.

THERE were eighty-two applicants who applied for license before the State Board, recently held at Raleigh, N. C. Four out of five of those who made the highest grades, and the Appleton prize of $25, which was awarded to Dr. F. H. Russell for the best general average, were students of Dr. Munroe's. This is exceedingly creditable to this School of Medicine and to Dr. Munroe. The Charlotte Medical Journal congratulates Dr. Munroe on this record.

DR. E. J. BUCHANAN, of Rowan county, N. C., who graduated a year or so ago at the University of Maryland, with high honors, and who took the State prize at Wilmington last year, has moved to Lexington, where he will make his future home. The JOURNAL wishes him the success that he deserves.

SOMETIME ago our readers will remember that Dr. George M. Gould, of Philadelphia, offered a prize of $100 for the best essay on Modern Homœopathy, Its Absurdities and Inconsistencies. The prize has been awarded to William W. Browning, A. B., LL.B., M. D., of Brooklyn, N. Y., Lecturer upon and Demonstrator of Anatomy in Long Island College Hospital. We hope to give our readers the benefit of this article.

IT seems that there are black sheep in every flock, the medical tribe not being excepted. One of the great sensations produced recently was the trial, condemnation and execution of Carlyle W. Harris, who was a medical student. This not being a sufficient example to men and medical men, Dr. Robert Buchanan commits a similar deed and is to meet the same terrible fate unless Executive clemency interposes. Who next?

FORTY-SEVEN NEW PHYSICIANS.

FORTY-SEVEN graduates, out of eighty-two who applied before the State Board, recently held at Raleigh, N. C., is not a very large per cent. of those successful. This is necessarily due to one of two things: Either the examiners were too severe and rigid, or there was a deficiency of medical knowledge in those who failed. 'Twas no easy thing to be a physician many years ago and it certainly is a most difficult task at the present time. The present Board of Examiners are certainly men of great prudence and impartiality, and far would it be from them to do any thing that would cast a shadow of reproach over their noble work. They recognize the great advancement that has been made in medicine in the past fifteen years—recognize that graduates under them must reach a high mark of excellence, so that when their work is done and they retire for others to take their places, they can look back over their work with pride, feeling that they have done their duty to themselves and to their State.

DEATH OF DR. N. J. PITTMAN.

Dr. N. J. Pittman, of Tarboro, N. C., died on Sunday morning, May 15, after a lingering illness. The deceased was in his seventy-fifth year and had been a practicing physician in Tarboro for forty-five years. He was chosen to fill many positions of honor by the medical profession. At one time he was vice-president of the National Medical Society.

THE name of a large, substantial and reliable firm is added to our list of advertisers in this issue—the Century Chemical Company of St. Louis, Mo. The goods manufactured by this house have proven to be of the highest grade and their preparations to possess the most excellent qualities. Their Medicated Bougies, Pessaries, etc., are growing more popular every day, and their preparations in greater demand than ever. Read their advertisement carefully, found elsewhere in this JOURNAL.

AT the recent meeting of the N. C. Medical Society, held in Raleigh, the prize of $100 offered by Dr. N. J. Pittman, of Tarboro, for the best original essay on medicine, was divided between Dr. J. M. Hays, of Oxford, and Dr. R. L. Gibbon, of Charlotte. The title of Dr. Hays' essay was "The Microscope and Its Relation to the Practice of Medicine." The illustrations are numerous and well drawn. The title of Dr. Gibbon's essay was "Hepatic Abscess." Of course both papers are very valuable.

DR. W. H. H. COBB, GOLDSBORO, N, C., PRESIDENT OF THE NORTH CAROLINA MEDICAL ASSOCIATION.

IN electing Dr. Cobb President, the Society could scarcely have placed this honor upon one who more justly deserved it, or one who will fill the position more gracefully and to the satisfaction of all. His professional standing and unlimited experience entitles him to positions of honor and trust, and the Society is to be congratulated upon their wise and most excellent selection.

A Lady in distress wrote the following to a physician: Dear Doctor—"Please come at once and bring your urethra with you." He took a catheter.

DR. W. J. HILL, a young physician of Statesville, N. C., son of J. H. Hill, Esq., clerk of Iredell Superior Court, and Miss Maggie, daughter of Judge R. F. Armfield, of the same place, were quietly married at the bride's home, recently, by Rev. Dr. W. A. Wood.

DR. W. P. BEALL, OF GREENSBORO, N. C., HURT.

DR. W. P. BEALL, of Greensboro, was driving a double team of spirited horses Thursday evening, May 11th, when they ran away. He was thrown out and one of his ribs was broken. It was reported on the streets, says the Record, that he had been killed, and there was much excitement. He passed a restless night but was resting quietly the next morning. He may be injured internally but it is not thought so.

INTERESTING PROCEEDINGS OF THE NORTH CAROLINA MEDICAL SOCIETY, HELD AT RALEIGH, N. C.

FIRST DAY—MORNING SESSION.—MAY 9TH.

The Society was called to order by Dr. James McKee, of the local committee of arrangements, Dr. J. W. McNeil being in the chair, and Dr. R. D. Jewett, of Wilmington, secretary. The convention was opened with prayer by Rev. Dr. M. M. Marshall, Rector of Christ Church of this city. The address of welcome was delivered by Hon. C. M. Busbee. Dr. G. W. Long, of Graham, responded to the address of welcome. The society was then called to order by the president for the transaction of business. Eighty-six answered to the roll call. President J. W. McNeil then read his address of welcome, which was referred to a committee of five to consider recommendations therein made.

The matter of taking in new members who have just passed their examinations was, after discussion, referred to a special committee of Drs. Hines, Hodges and Boothe.

A fraternal message from the South Carolina State Medical Society was submitted by Dr. John H. Harden, of South Carolina, who was tendered the freedom of the floor, and invited to take part in the deliberations of the society.

The President appointed as the committee on credentials Drs. K. P. Battle, T. D. Haigh and A. W. Knox.

On motion of Dr. James McKee, a fraternal greeting was ordered sent to the Indiana State Medical Society now in session.

The President announced as the committee on finance Drs. Cobb, Boothe and Stancil.

A resolution of regret for the illness of Dr. N. J. Pittman, of Tarboro, was adopted, and ordered sent to Dr. Pittman.

A letter from Dr. Oscar Gregory, of Oxford, who is now suffering from paralysis, was read and ordered to be tenderly answered by the secretary, and on motion of Dr. Booth, Dr. Gregory's membership was ordered continued without dues.

An invitation from Dr. Wood to the society to visit the North Carolina Insane Asylum was read.

Adjourned till 3 o'clock p. m.

AFTERNOON SESSION.

The society was called to order by the President at 3 o'clock.

Dr. Thomas Stamps, of Lumber Bridge, read a paper upon Cerebro-Spinal Meningetis, which was referred to the committee on publication.

Dr. A. M. Ballard, of Asheville, read a paper upon Vis Naturæ et vis Medicatrix Naturæ, which was referred to the committee on publication.

The secretary read a letter announcing J. H. Bobbitt, J. I. Johnson and B. W. Hunter as delegates from the North Carolina Pharmaceutical Society to the State Medical Society.

A paper on the practice of medicine by Dr. E. M. Summerell, of Marion, was read by Dr. T. E. Anderson, of Statesville, after stating that Dr. Summerell was prevented from attending this session of the society. Referred to committee on publication.

Dr. R. H. Whitehead, of Chapel Hill, read a paper on Gynæcology, which was referred to the committee on publication.

An invitation was received from the Ladies' Memorial Association of Raleigh to attend the memorial exercises at 3 o'clock Wednesday, May 10. Also an invitation from President Holladay to visit the A. and M. College.

In the absence of the committee on the Pittman Prize, the chair appointed Drs. Bahnson, R. H. Whitehead and J. F. Miller to take the papers already submitted and act upon them.

A paper entitled The Pharmacist and The Physician by Henry C. Hicks, of Raleigh, was read by the secretary.

A paper by Dr. J. H. Marsh, of Fayetteville, on Obstetrics, was referred to the committee on publication.

MORNING SESSION—MAY 10TH.

The society was called to order at 10 o'clock.

Report of Section on Surgery, Dr. J. P. Munroe; inguinal hernia, Dr. J. P. Munroe; report of a case of Cæsarean section, Dr. J. T. Nicholson; appendicitis viewed from a personal standpoint, Dr. J. W. Long; report of surgical cases, Dr. W. H. H. Cobb; voluntary papers relating to surgery; report on State medicine; the physician in relation to courts of justice, Dr. S. J. Montague; criminal abortion, medico, legally considered, Dr. J. D. Roberts; voluntary papers relating to State medicine, diphtheria, Dr. R. A. Patterson; voluntary paper by Dr. R. L. Payne.

At 12 o'clock conjoint session with the State Board of Health.

AFTERNOON SESSION.

The society was called to order at 3 o'clock.

Reports of committees.

Oral and written reports of cases.

(At 3:30 o'clock the society moves in a body to attend the Memorial exercises at Metropolitan Hall.)

The sessions following these were devoted mainly to the submission and discussion of papers.

Of eighty-two applicants forty-seven succeeded in obtaining licenses.

The following officers were elected for the ensuing year:

President, Dr. W. H. H. Cobb, of Goldsboro; Vice-Presidents, Dr. J. A. Hodges, of Wilmington, Dr. R. W. Tate, of Greensboro, Dr. Willis Alston, of Littleton, Dr. M. H. Fletcher, of Asheville; Secretary, Dr. R. D. Jewett, of Wilmington; Treasurer, Dr. M. P. Perry, of Macon.

The committee chose as orator for next year, Dr. E. G. Moore, of Toisnot.

The next session will be held at Greensboro, May 15th, 1894.

The names of those who passed the examinations successfully and who received certificates are given below:

C. H. Phillips, J. F. Rhem, J. W. Dugurd, Joseph A. Morris, Leroy Long, W. G. Beckwith, W. B. Moore; S. P. Wright (colored), J. F. Abel, Frank H. Russell, C. A. Anderson, R. F. Holloway,

E. F. Corbell, E. S. Crumpler, L. L. Sapp, Joseph Dixon, G. F. Arie, T. A. Norment, Thos. M. Riddick, W. W. McKenzie, Chas. J. O'Hagan Laughinghouse, F. F. Stephenson, G. A. Smith, W. F. Faison, Geo. C. Ivie, T. A. Hathcock, C. T. Winley, W. D. Bower, C. B. Walton, B. C. Waddell, Chas. W. Moseley, W. J. Moore, Chas. I. Wyche, M. E. Street, J. L. Kernoodle, A. M. Whisnant, Chas. J. Harper, R. J. Williams, F. W. Whitehead, W. B. Norment, R. G. Averett, C. B. McNairy, H. T. Pope, C. G. Ward, C. F. Griffin, T. S. Faucette, W. L. Hill.

WE were glad to meet our clever and genial friend, Mr. Spraigue, at the Raleigh Convention. Mr. Spraigue, as every body knows, represents the well known and popular firm of Sharp & Dohme. The high grade of goods manufactured by this house are so well known as to need no introduction, being equal to any in the world.

MR. BARTLETT, the popular representative of E. A. Yarnall Co., of Philadelphia, made a very attractive display of Surgical Instruments at Raleigh, during the meeting of the North Carolina Medical Association. Mr. Bartlett, as well as the house he represents, is very popular with the physicians of this State. We are glad to say that this house receives a liberal patronage from this section, that their instruments are all that they claim for them and that they have the esteem and confidence of the entire profession.

SEND to the New York Pharmaceutical Co., of Bedford Springs, Mass., for their large Handbook, which contains a great many valuable formulas and a full description of the therapeutic uses of of Hayden's Viburnum Compound. This compound has become very popular in the treatment of a great many ailments of women. It is a pleasure for this Journal to recommend and endorse this valuable remedy.

Vin Marina is a "diffusible stimulant and tonic in anæmia, nervous depression, sequelæ of child-birth, lymphatism, tardy convalescence, general "malaise," and after wasting fevers. It is the only tonic stimulant without any unpleasant reaction, and may be given indefinitely, never causing constipation."

BOOKS RECEIVED.

MANUAL OF CHEMISTRY. A Guide to Lectures and Laboratory work for Beginners in Chemistry. A Text-book, specially adapted for Students of Pharmacy and Medicine. By W. SIMON, Ph.D., M. D., Professor of Chemistry and Toxicology in the College of Physicians and Surgeons, Baltimore, and Professor of Chemistry in the Maryland College of Pharmacy. New (4th) edition. In one 8vo. volume of 490 pages, with 44 woodcuts and 7 colored plates illustrating 56 of the most important chemical tests. Cloth, $3.25. Philadelphia, Lea Brothers & Co., 1893.

The medical student, as well as the general practitioner, is to be congratulated on the appearance of this manual. The science of chemistry has so rapidly grown that one may give his whole time exclusively to it and then be not master of the situation. In reading this book it seems that the author has done every thing that should have been done and left undone things that are irrevelant. The work is divided into seven parts. The author begins by giving the fundamental properties briefly. The fundamental principles must be laid down. This being necessary for an understanding of chemical phenomena. Part second treats of the principles of chemistry. Under this head the author enters into a brief discussion of theoretical views regarding the atomic constitution of matter. No chapter in the book is of more importance than this one, and none is presented in a clearer manner or can be more readily understood. Part third is devoted to non-metals and their combinations. The fourth chapter treats of metals and their combinations. Under each of these chapters the symbols and atomic weight of the various metals and metalic elements are given. All the chemicals that are mentioned in the United States Pharmacopœa are included, and this makes the book specially useful to students of pharmacy and of the medical inclination. Chapter fifth is devoted principally to analytical chemistry. Under this head the student will find special benefit and aid in his laboratory work, which is often an arduous task and a duty difficultly performed. The quantative method is chiefly explained in one short article. Part six treats of carbon compounds or organic chemistry. The seventh and last chapter is devoted to physiological chemistry, and the author states that this chapter was written especially for students. A great deal of new matter has been added to these chapters, and special care has been taken to mention the most modern methods for clinical examinations in clinical diagnosis. One thing which will be of great help to the student is the questions at the first of

the page. This familiarizes him with the most important questions that might probably be asked him before the many Boards he now has to be prepared to meet. Seven plates adorn the book, showing the colors of a number of chemicals and their actions. The book is well illustrated, tastefully bound, without typographical blemish and is the best chemistry we have reviewed. We congratulate the publishers upon the appearance of this book, and as it goes to the profession, students and practitioners will do well to purchase at once.

THE PRINCIPLES AND PRACTICE OF BANDAGING, by GWILYM G. DAVIS, M. D., Universities of Pennsylvania and Gottingen, Member of the Royal College of Surgeons, England; Assistant Demonstrator of Surgery, University of Pennsylvania; Surgeon to the Out-Patient Departments of the Episcopal and Children's Hospitals; Assistant Surgeon to the Orthopœdic Hospital. George S. Davis, Detroit, Mich., 1891.

Bandaging, while not a science, is nevertheless, governed by something more than empiricism, and it is one of the objects of this work to direct attention to the fundamental bandages and to the importance of first learning the principles and then their application in the form of the various special bandages. There is nothing so hideous as to observe a bandage improperly and unskilfully applied. Often the surgeon, in a most delicate and skilful manner performs a most difficult operation, and then in a careless and reckless way applys his dressings and bandages in an unsightly manner. The perusal of this volume has given the reviewer a great deal of pleasure, partly from the newness of the work and the great aid and help it has been to the reviewer. The work is divided into three parts. Part I deals with the roller bandages. Part II with sling bandages or tailed. Part III with handkerchief bandages. It contains 61 pages, 172 illustrations of the different kinds of bandages, which are printed from 23 plates, and each plate occupies a separate page. This subject has not had the proper amount of study that it deserves, and I am glad that this able author has given this most important subject his attention and presented it to the profession. The art of applying bandages skilfully should be acquired by every student, and while this can only be done by practice, yet a work of this kind will be a valuable guide and of great help. The book is handsomely printed on fine paper, with wide margins. It is one of the most recent and complete works on this subject and we recommend it to the attention of our readers.

A Practical Treatise on Materia Medica and Therapeutics, with Especial Reference to the Clinical Application of Drugs. By John V. Shoemaker, A. M., M. D., Professor of Materia Medica, Pharmacology, Therapeutics, and Clinical Medicine, and Clinical Professor of Diseases of the Skin in the Medico-Chirurgical College of Philadelphia; Physician to the Medico-Chirurgical Hospital; Member of the American Medical Association, of the Pennsylvania and Minnesota State Medical Societies, the American Academy of Medicine, the British Medical Association; Fellow of the Medical Society of London, etc., etc. Second Edition. Revised. In Two Royal Octavo Volumes Volume I, 353 pages: Devoted to Pharmacy, General Pharmacology, and Therapeutics and Remedial Agents not Properly Classed with Drugs. Volume II, 680 pages: An Independent Volume upon Drugs. Volume I, in Cloth, $2.50 net; Sheep, $3.25 net. Volume II, in Cloth, $3.50 net; Sheep, $4.50 net. Philadelphia: The F. A. Davis Company, Publishers, 1914 and 1916 Cherry Street.

There is no branch of medicine that should be studied with as much care, and none with which we should be more familiar than that of Materia Medica and Therapeutics. In selecting a work of this class particular attention should always be given as to the character and quality of the work, using only those that are written by bright stars in the galaxy of the medical world, and as such these volumes by Dr. Shoemaker fulfills every requirement. This work is different from others on Materia Medica and Therapeutics. The two volumes, one being devoted to Pharmacy, General Pharmacology and Therapeutics and remedial agents not properly classed with drugs, the other to Materia Medica properly, makes the work convenient in size and easy of reference. By this arrangement you can find anything you want in a moment's notice. To properly understand the principles of Materia Medica thoroughly, you must be acquainted with the principles of pharmacy to some extent, and with this work the proper amount of space has been allotted to the subject of pharmocology. Prescription writing and formulas are also presented in a very clear and interesting manner. Everyone knows the great need of the proper instructions, especially to the young graduate, of prescription writing. The remaining chapters in vol. I are the following: General Therapeutics and Classification of Remedies—Electro Therapeutics. In this chapter one object has been held steadily in view, lucidity. The physical properties of this force, its mode of generation, the laws which regulate its manifestations and the mechanical means by which it is applied are described as briefly as is consistent with utility. The importance of Electricity in the diagnosis of nervous affections and its value and indications in therapeutics are briefly discussed. Massage and Rest Cure, Pneu-

motherapy and Pneumatic Differentiation, Hydrotheropy, Balneotheropy, etc.

Vol. II is a much larger book than vol. I, containing nearly eleven hundred pages. For the convenience of the reader and student the writer has considered in a systematic and alphabetical order the remedial agents or drugs that are now in use in the treatment of disease. The new preparations that have recently grown very popular are fully considered according to their merits and importance. Each drug has been carefully considered from its botanical source, giving the physical properties and dose, the physiological action and therapeutical indications. These two books maintain the high grade of excellence in the make up of the many books sent out by these publishers. The work is of rare value and can be recommended as up to date and reliable.

SURGICAL HANDICRAFT: A Manual of Surgical Manipulations, Minor Surgery, and other matters connected with the work of House Surgeons and Surgical Dressing. By Walter Pye, P.R.C.S., Surgeon to St. Mary's Hospital and the Victoria Hospital for Sick Children; late Examiner in Surgery at the University of Glasglow. First American edition, from the third London edition. Revised and edited by T. H. R. Crowle, P.R.C.S., Surgical Register to St. Mary's Hospital, and Surgical Tutor and joint Lecturer on Practical Surgery in the Medical School. Upward of 300 illustrations on wood; eight volumes, 600 pages. Cloth, $3.50 net; leather, $4 net. E. B. Treat, publisher, No. 5 Cooper Union, New York.

The merits of this book speak for themselves, as this is the third edition in such a short time.

The Arrest of Hemorrhage is the subject of the matter treated in the opening chapter. The many and different ways and methods that are so clearly and plainly shown and expressed for the controlling of hemorrhage adds not a little to the advantages of the book. There is no situation so embarrassing than to be unable to check an existing hemorrhage. This is a matter of great import in surgery. This is not a theoretical work on surgery, but it is a book that treats of the practical side of surgery. It tells you how to arrest bleeding wounds, how to skilfully and properly tie a knot, how to gracefully and smoothly apply bandages. By reading its pages you will be informed how to use splints. When emergencies arise, how to make them and many other things of great importance. It is a most practical and useful book. The brief marginal notes which epitomize the paragraphs and guide reference thereto is another feature which adds greatly to its convenience and usefulness. The book contains about 600 pages,

embellished with numerous most beautiful illustrations. There seems to be a charm about the manner and style in which it is written. It is elegantly bound, beautifully printed, written in a concise and pleasant style and on the whole is a very practical and good book specially suited to the needs of the physician.

MINERAL SPRINGS AND HEALTH RESORTS OF CALIFORNIA, with a complete Chemical Analysis of every important Mineral Water in the World. A Prize Essay—Annual Prize of the Medical Society of the State of California, awarded April 20, 1889. By WINSLOW ANDERSON, M. D., M. R. C. P. Lond., and M. R. C. S. Eng., etc. 8vo., pp. 384. Illustrated. [San Francisco: The Bancroft Co., 1892. Price, $1.50.

This is certainly a comple and interesting work upon the subject chosen. Great praise is due Dr. Anderson, after diligent research and labor, in showing to the profession and the laity the high excellence in quality with which the springs of our own country are possessed. The book is written in a very pleasant and agreeable style, copiously illustrated, thus aiding greatly in presenting scenes of the most dazzling description. Some portions of the work are so graphically described, and existing in such numbers, that a prospective visitor would be puzzled in making a choice. One of the advantages of the book to physicians is that it gives the analyses of all the important Mineral Springs of the world. The work is printed in large clear type on good paper and neatly bound. The price has been placed within the reach of all, only $1.50. The book is well worth the money.

THE SCIENCE AND ART OF OBSTETRICS. By SHELDON LEAVITT, M. D., Professor of Obstetrics, etc., in the Hahnemann Medical College, and Clinical Professor of Midwifery in the Hahnemann Hospital, of Chicago, etc., etc., etc. Second edition, rewritten and enlarged. Chicago: Gross & Delbridge, 1892, pp. 769.

In the preface to this second edition the author says:

"When I came to review the first edition, more than three years ago, so many changes and additions were found needful that I at once resolved again to undertake the drudgery inseparable from a thorough revision of a work of this size. What is herein presented has been fully reduced to manuscript, and reset, hundreds of pages being displaced by entirely new matter, and not a single page being reproduced without change. The size of the work has been augmented by upward of one hundred pages, the therapeutic hints have been increased in number and perspicuity, recent methods have been introduced, imperfect cuts have been improved and some excellent ones added, until we are able to send out an entirely remodeled and reconstructed book."

Our library table is once more graced with a handsome work on the science and art of obstetrics, written by Prof. Sheldon Leavitt. A work of this character written by a teacher with the experience and professional standing as the author of this book possesses is sure to meet the approval of his profession, and a ready and quick

sale. The work is divided into four parts—the anatomy and pysiology of the female pelvic organs—pregnancy—labor, and the puerperal state. This book is written in a peculiarly interesting manner, the author expressing himself in terms readily understood, clear and concise. Being written at the time when many other books of a similar character were written, this one stands forth on its own merits and usefulness, equal to any. The type is good and the printing exceptionally fine, being printed on perfectly white paper, which adds greatly to the beauty of any book. The illustrations are remarkably well executed and to the busy practitioner it will not come amiss as a good book for study and reference. A handsome index closes the volume.

THE fine exhibit made by Park, Davis & Co., at Raleigh, N. C., during the meeting of the State Medical Society, was very highly complimented. This house is probably the largest manufacturing concern of its kind in the world, and they certainly have the confidence and esteem of the medical profession. We feel that it is our duty not to overlook the fact that a great part of their popularity and success, in this and adjoining States, is due to their representative, Mr. Hancock, who we regard as a man of unusual intelligence and enterprise.

BARTLETT, GARVENS & CO., of Richmond, Va., who are the proprietors of the largest Surgical Instrument House in the South, made a very handsome and extensive display of their instruments at Raleigh during the meeting of the North Carolina Medical Society. This house is, to a great extent, headquarters for the Southern trade, being located at Richmond, which makes it easy of access. Their goods are all of the finest quality and are guaranteed. Send for their catalogue and give them your trade. We can assure you that your dealings with these gentlemen will be pleasant and satisfactory.

A Valuable Therapeutic Agent.

The Elixir Six Iodides (Walker-Green's) ranks as one of the most valuable pharmaceutical preparations we have for the treatment of skin diseases, both scaly and popular. Many physicians prescribe it with great satisfaction where they desire tonic and alterative effects.

Selections.

American Medical Editors' Association.

My Dear Doctor :—The following programme has been arranged for the Eleventh Annual Meeting of our Association, at Milwaukee, Wis., June 5th, 1893.

The general business meeting will be held at 4 p. m. The President, Dr. Culbertson, will deliver an address. Dr. Gould will read a paper on "Medical Orthography." This will be followed by a paper on "Some New Phases of Journalism," and a discussion. Reports of Committees and election of officers and other business will conclude the session.

The Banquet will be given at 6:30 p. m., and be followed at 8:30 by the annual address, by Dr. Ernest Hart, Editor of the British Medical Journal.

This will be followed by an address on "Editorial Responsibility and Questions of Libel," by the Hon. Clark Bell, Editor of the Medico-Legal Journal, and President of the International Medico-Legal Congress. Dr. J. Stanly Hall, Editor of the Psychological Journal, and President of Clark University, will address the Association on "Psychological Phases of Medical Study and Journalism." Discussion and remarks will follow.

We extend to you a very urgent invitation to be present, and if you cannot come, have some one represent your Journal, so that we can have a more complete organization of all our journalistic interests.

With pleasure, we are, fraternally yours,

J. C. CULBERTSON, President.

T. D. CROTHERS, Secretary.

The Columbia Chemical Co., successors to the Health Restorative Co., of 90 South Fifth Avenue, New York, make an announcement in this issue regarding the "Animal Extracts," made after Dr. Hammond's formulas, which they will market. A great many eminent physicians, all over the country, have become very much interested in the therapeutic value of these animal extracts, and no doubt a great many of our readers will also be much interested in this announcement.

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IDEAL VEGETABLE ALTERATIVE.

It is daily used with success
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WRITE FOR

"A VOICE FROM THE SOUTH."

FOR PHYSICIANS ONLY.

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ATLANTA, GA.

The Skittish Doctor.

Frederick H. Cogswell, in the April number of Harpers' New Monthly Magazine, relates the following (Ex.):

Dr. S—— was noted among his professional brethren for his power of concentration. When once he bent his mind to a problem he became totally oblivious to everything about him.

The doctor had a horse that was almost as famous as himself. Among her peculiarities was the habit of shying. She would not shy at things which most horses consider fit subjects for that sort of digression. She would pay no attention whatever to a newspaper blowing about the streets, but was mortally afraid of a covered wagon. At the sight of one of New Haven's suburban stages she would run over the curb-stone and threaten not only the doctor's life, but that of the chance passer. Of this habit she could not be broken. It seemed as though she could smell a stage long before it came in sight, so that the doctor would go half a dozen blocks out of his way rather than meet one. Early one morning he received a telephone call to the effect that one of his patients had become alarmingly worse. Without waiting for his carriage he started to walk, the distance being about a mile. His mind became absorbed in the case, but not so much so that he did not remember that the course of the Seymour stage lay right in his path. He looked at his watch and saw that he would be sure to meet it if he went the shortest way. He was in a hurry to get to his patient, but there was no help for it. He uttered a malediction over the circumstances and turned off at the first corner. This obliged him to nearly double the distance, and the day was warm. He walked as he never walked before, and failed to recognize a couple of intimate friends whom he nearly ran over. It was not until he had spent two hours with his patient, and come out to look for his horse, that he had begun to realize that he had walked a mile out of his way, so that he need not shy at the Seymour stage!

ALBEMARLE CHEMICAL CO., New York:

Dear Sirs:—I have used your preparation Therapine in over two hundred cases, and consider it the best antipyretic and analgesic I have ever come in contact with. In no case have I been disappointed. I administer it mostly in powder, the taste not being objectionable. T. D. FINCK, M. D., Louisville, Ky.

A Palatable Preparation of Senna.

Bartholow says that senna would be one of our best cathartics, "if it were not so disagreeable." This disagreeableness is not only removed but pleasantness is put in its place in that preparation of senna known as Syrup of Figs. It forms the active principle of that effective laxative and because of the pleasant taste of the combination it has a large use in all cases where a general laxative is indicated.

The great contrast between the old dosing of Castor Oil, when there was almost open war declared in the home, and the modern method of preparing drugs to please the palate as well as to accomplish the desired result, is best appreciated by those of us who remember our childhood days, and now have children of our own. These thoughts come to us as we notice with what indifference a child or sensitive patient takes the laxative prepared—Syrup of Figs—by the California Fig Syrup Co. But we can assure our readers the results are far from indifferent.

In this connection it is well to observe, for it is a matter of no small importance to the public that the highest courts in the land have decided the validity of trade-marks, trade-names or trade-words for it is the safest protection against the selling of worthless imitations and base frauds. For instance, a company places a most eligible preparation on the market and presents it to the public at a great outlay before the least profit is derived. These unscrupulous imitators place worthless combinations on sale and derive at once their share of the large sales which the energy and capital of the originators ensured. Soon, however, these worthless samples injure the sales, and a preparation which was originally a very desirable combination becomes known as uncertain and disappointing. Now a trade-mark or trade-word is a protection to the public from these evil designers. Take the recent case of the California Fig Syrup Co. The U. S. Court of Appeals, which is the court of highest resort in such cases, rendered a decision on the 30th of January last that this Company had acquired a reputation for the excellence of this medicine under the name of "Fig Syrup" or "Syrup of Figs," and they only had the right to use this name in connection with a laxative remedy.

The Soluble Hypodermic Tablets, manufactured by Messrs. Sharp & Dohme, Baltimore, are reliable and perfect.

SALO-SEDATUS

(OPPOSED TO FEVER AND PAIN.)

SALO-SEDATUS is a powerful Antiseptic, Antipyretic, Diuretic and Anodyne. It neutralizes septic poisons, and opposes septic conditions. It rapidly reduces body temperature when above the normal standard, promptly relieves pain, and induces refreshing sleep. It never distresses the stomach nor disturbs the bowels. While it quiets excitement in all parts of the system, it promotes secretion and favors excretion from every direction.

SALO-SEDATUS is a reliable remedy in the treatment of Erysipelas, Puerperal Fever, Typhoid Fever, Dysentery, Scarlet Fever, Whooping Cough, Measles, Small-pox, Malarial Fevers, Rheumatism, Neuralgia, Dysmenorrhea, Cystitis, Metritis, Peritonitis Ovaritis, Headache, La Grippe, and all diseases accompanied with fever or pain. It is an excellent remedy to use in connection with quinine, when quinine is indicated, or to prepare a patient for the kindly action of quinine.

SALO-SEDATUS is an invaluable remedy in the treatment of children's diseases. There is nothing like it to relieve the pain and hush the cries of colicky children. In the treatment of children where high fever is suffered, it quickly lowers the temperature, quiets nervous excitement, and prevents congestion of the brain and convulsions. It is the fever and pain remedy for children, and it is perfectly safe.

SALO-SEDATUS is free from the narcotic and depressing effects upon the nervous energies which so often accompany and follow the use of Antipyrine, Veratrum, Chloral, Morphine and kindred drugs. It is vastly superior and preferable to all remedies of its class, and is rapidly superseding all others where it is known. It requires a fair trial only to establish its merits as THE antiseptic, antizymotic, fever and pain remedy. Once familiar with its prompt and reliable action, its convenience and wide range of usefulness, no physician will practice without using or prescribing it.

Send for Pamphlet and Free Sample.

Address **SALO-SEDATUS CHEMICAL COMPANY,**

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New Digestive Agent.

Another new pepsin, this time one that is inodorous and entirely free from septic contamination, has just been announced. The manufacturers (Sharp & Dohme, of Baltimore, Md.,) claim that it is the purest and most active pepsin ever introduced and as they offer to send samples of Webber-Pepsin, S. & D., standard 1 to 6,000, to our readers upon application these statements can readily be subjected to a critical examination and be proven or disproven according to actual existing facts. Their advertisement appears on another page of the MEDICAL JOURNAL.

Ergotole S. and D., and Webber-Pepsin S. and D., illustrate true pharmaceutical progress. Both are ideal products, being more concentrated, permanent, palatable and active than any other preparation of Ergot or Pepsin in the market. As samples can readily be obtained by addressing Sharp & Dohme, of this city, we trust our readers will avail themselves of the opportunity and at the same time favor us by mentioning the CHARLOTTE MEDICAL JOURNAL.

Notes.

Few physicians, who have practiced medicine five years, but have assured some patient relief, in the use of cod liver oil, only to see the patient sink lower and lower, from want of power to digest the remedy. Cod Liver Glycerine removes this difficulty; capable of being diluted with water, requires no digestion, but is a digestive stimulant. If you give Cod Liver Glycerine it will be assimilated. It combines readily in all prescriptions.

The Superintendent, and Surgeon in charge of St. Louis City Hospital, Dr. H. Marks, announces that Cod Liver Glycerine is now used in that institution. Its power to mix uniformly in any proportion, in all prescriptions, or to mix with water and spirits without separating on standing, renders it the most desirable reconstructive in the convalescent period of difficult surgical cases, or acute diseases attended with emaciation; while its digestive properties insures its therapeutic action. ‡

A Rare Case.

A surgeon of note solicited of me treatment for a case of tuberculous disease of ankle joint. I suggested Cod-Liver Glycerine, because of being robbed in its preparation of those elements which too often inhibit grateful acceptance of the crude oils hitherto administered.

In one month the child appreciably took on flesh and vigor, the betterment in the joint being in exact consonance with augmented flesh gain.

Its easy assimilation by phthisical patients, who not infrequently exhibit dyspeptic ailments as initial to lung deposition, would commend it as ideally the reconstructive to supply the long lost link in the elaboration of a tissue builder.

It is, therefore, a nutrient admirably qualified to repair wast resultant on processes of combustion incident to febrile disturbances.

A. M. CARPENTER, M. D.

[NOTE—Dr. Carpenter is Prof. of Theory and Practice, Barnes Medical College, St. Louis.]

We call the attention of our readers to the attractive and distinctive Antikamnia advertisement in this number. This firm gladly sends samples free to physicians who will furnish their address.

With Apioline for your female patients and Santal-Midy for your male patients you are doubly armed. Liberal samples from E. Fougera & Co., New York, by mentioning this Journal.

Pil. Dipsomania (Dr. Mann.)

At a meeting of the American Association for the Study and Cure of Inebriety, held at the New York Academy of Medicine, March 23d, 1893, Dr. Edward C. Mann, of Brooklyn, N. Y., Medical Superintendent of Sunnyside Private Hospital for Diseases of the Nervous System, Alcoholism, and the Opium Habit, read a paper on "Science vs. Folly in the Treatment of Disease Caused by the Abuse of Stimulants and Narcotics: A Plea for the Suppression of the Nostrum, Patent Medicine, and Specific in Rational Therapeutics." After comparing scientific medication with charlatanism and showing the physiological action of alcohol on man and his offspring, as well as the diseases produced by indulgence, Dr. Mann passed to the subject of the Treatment of Disease of Inebriety. He recommended the following as a good tonic and sedative in Dipsomania, having a good effect on the stomach, and tending to antagonize both the degenerative changes in the brain, and the effects of alcohol on the structures of the body:

℞ Quininæ sulph..... grs. ii.
Zinc oxide..... grs. ii.
Strychnia sulp..... gr. 1-40
Arsenic..... gr. 1-100
Capsicum..... grs. ii.

M. et ft. pill No. 1. Sig.: One pill three times a day,

Together with this pill, Dr. Mann uses in his private hospital for sixteen days the following hypodermatic dosiometry:

℞ Strychnia nitrat..... gr. i.
Aquæ dest..... ℥ ss.

M. Eight minims daily for eight days; 4 minims daily for another eight days. To quiet the following nausea of alcoholics, two or three drops of wine of ipecac on the tongue, fasting.

The patient is kept in bed for the first few days, and fed on milk and meat juice for nourishment. Hydrotherapy and electrotherapy are employed. To induce sleep, the following sedative is administered at night for a few days:

℞ Tr. opii deod.
Ext. hyoscy, fld.
Chloral hydrat.
Pot. Bromide } aa..... ℥ i.
Tr. capsici..... ℥ ss.
Tr. aconit. rad..... ♏ v.
Aquæ menth. pip..... ad ℥ iv.

M. et Sig.: Two tablespoonfuls at bedtime for a few days only, freely diluted with water.

If the patient is very much excited and is bordering on delirium tremens, the following is useful for two or three nights:

℞ Hyoscin. hydrobromat. ..... gr. i.
Aquæ dest. ..... ʒ ix
Spt. vini rect. ..... ʒ i
M. et ft. hypodermatic solution. Sig.: Dose from 5 to 10 minims *pro re nata.*

The diet table in Dr. Mann's hospital consists of milk, eggs, oysters, meat, fish of all kinds, buttermilk and koumiss, plus a minimum amount of the cereals. Vegetables and starchy foods allowed only very sparingly, the idea being to rely on a diet which requires the least vital force and oxygen to digest, assimilate and appropriate, and to have ingested into the body such material as will, when brought under the influence of oxidation, yield energy, which is the expression of vital activity, and give the largest working power for the amount of food taken. By such a plan of treatment patients are sent out with restored health, the craving for alcohol gone, the lost will power restored, the shattered nervous system built up, and with a concentration of energy, physical ability and mental activity obtainable by no other plan of treatment.

In order to render Dr. Mann's pill available to the medical profession, Parke, Davis and Co. have added it to their list of gelatin-coated pills, which they are now prepared to supply in bottles of 100 or 500. Detroit, New York and Kansas City.

In the treatment of Nervous Diseases and General Debility, McArthur's Syrup Hypophosphites demonstrates its restoratives powers. Here it is not the stimulating action of the remedies usually classed as tonics that is needed. The organic powers of the system are already taxed to their utmost ability to carry on the physiological processes of life. The Hypophosphites of Lime and Soda gives the much needed effect in those conditions—not that of a stimulant by irritation, but that of a true nutriment to the starving tissues. Its tonic effects are permanent as they are the effects of a richer blood supply, bringing healthy food and oxygen to the tissues. Thus the patient is gradually brought up to his normal condition.

Treatment of Malaria is a fall problem. Drs. G. C. Cope, of Organ Creek, N. C.; W. A. Van Duyn, of Trenton, N. J., and Hug, of Detroit, have had excellent results from Febricide Pills.

Physicians who have been disappointed in the use of favorite Prescriptions have the remedy in their own hands. Prescriptions and orders should read "Wm. S. M. Chem Co."

GREEN : DRUG FLUID EXTRACTS

CHARACTERISTICS:

UNIFORM STRENGTH, CONVENIENCE OF ADMINISTRATION, NON-LIABILITY TO DETERIORATION BY AGE, POSITIVE THERAPEUTIC EFFICACY.

The WM. S. MERRELL CAEHEMICAL CO. will not hold themselves responsible for the identity of Fluid Extracts, filled out by druggists from bulk stock, even though the written label may read "Merrell's." **CAUTION.**—Accept original packages only.

☞ *Read our Monograph—"Green Drug Fluid Extracts: Their Origin, History and Rationale." Sent free to any address.*

NATURAL. FROM WINTERGREEN OIL. } TRUE SALICYLIC ACID. TRUE SALICYLATE SODIUM

IT IS ACKNOWLEDGED THAT

COMMERCIAL SALICYLIC ACID AND ITS *SODIUM SALT*	are elow but certain poisons. produce symptoms closely resembling delirinm tremens. patients become delirious. dangerous to humrn life. have to be watched and not to be trusted. retard convalescence. should not be administered internally, however much they may have been dialized or purified.

Order and Prescribe ☞ { ACID SALICYLIC—True—MERRELL.
SODIUM SALYCILATE—True—MERRELL.

FLUID HYDRASTIS.

A solution of definite strength and reliability, representing all the valuable constituents of the drug—the offensive and irritating resins being rejected. The only perfect representative of the drug in the fluid form within reach of the medical profession. Though often attempted it has never been successfully imitated. Send for our pamphlet on "Hydrastis and its Preparations."

The Wm. S. Merrell Chemical Co.,

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96 Maiden Lane, New York City. Laboratories, Cincinnati. A. J. Conner & Co. Boston.

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Anderson Antiseptic Vaginal Capsules

FOR THE LOCAL TREATMENT OF

DISEASES OF THE VAGINA AND UTERUS.

The most efficient and cleanly means of introducing remedies into the vagina. Antiseptic, perfectly soluble and reliable. Each capsule contains an absorbent tampon which may be medicated with any remedy indicated.

WHEN?

In all cases of acute and chronic inflammation of the lining of the womb, gonorrhoel, syphilitic, purulent and leucorrhoeal discharges.
Relaxation of the uterine ligaments and weakening of the vaginal walls.
Falling of the womb. Ulceration of the osuteri.
Disease of the ovaries and fallopian tubes.
Painful and scanty menstruation.
Where the womb is extremely irritable and neuralgic.

HOW?

Moiston the tampon with the remedy, draw it back into the capsule by means of the linen thread, replace cap and insert.

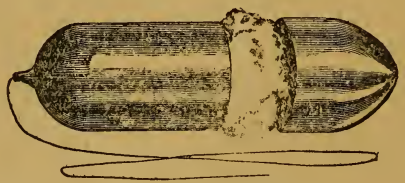
WHAT?

The result is a grateful relief to the sufferer and satisfaction to the physician. No handling of disagreeable drugs; no loss of medication in the introduction, no soiling of linen.

THE VERDICT!!

RATIONAL. CONVENIENT. CLEANLY. EFFICIENT.

Three Sizes.
No. 1 Small
No. 2 Medium
No. 3 Large



Tampon.
Absorbent Cotton, Oulo-Kutun (Wool and Cotton) or Wool, as desired.

Exact size of No. 2 Capsule.

Any size by mail postpaid on receipt of price, 60c. per box.

VALUABLE AS A PESSARY.

Extract from a letter from Dr. A. J. Howe, Professor of Surgery, Eclectric Medical Institute, of Cincinnati, O.

"The Anderson's Vaginal Capsules charged with tampons of Oulo-Kutun are a convenient vehicle and medium for introducing douches or medicated fluids into the vagina, and retains them there. Astringent, sedative and antiseptic liquids may be thus employed, instead of the syringe as an implement, or a speculum,"

Respectfully, A. J. HOWE, M. D.

☞ Send for printed matter containing valuable information.

THE HALL CAPSULE CO.

Manufacturing Chemists. CINCINNATI, OHIO.

Have you seen our "Ruby Capsule" for disguising the physical appearance of prescriptions, and for use when two medicines are to be taken in alternation? Send 10c. for trial box of 100.

"Artificial Feeding of Infants."

By Cyrus Edson, M. D., Sanitary Superintendent Board of Health, New York City.

Of course the best food for an infant is mother's milk, but it is not always possible to use this: First, because the mother may be unable to supply sufficient nourishment to sustain the child. Second, because the mother's milk is not of proper composition and does not agree with the babe. Third, because wet nurses are difficult to obtain and may be objected to not alone on account of the two foregoing reasons, but also on account of the danger that they may transmit disease to the suckling.

It becomes apparent every year that fewer mothers are able to properly nourish their offspring, a condition that is being effected by modern civilization.

The problems of proper infant treatment therefore becomes more and more important, and is one of the most perplexing that medical men have to deal with.

The natural substitute for mother's milk would be cow's milk, as it is most easily procured, and as it contains all the elements necessary to support and nourish human life. The reason that cow's milk is not a perfect substitute for human milk and is not adapted to the purposes of the latter, is, because the two differ materially in composition. Another reason might also be justly advanced, cow's milk that has not been sterilized may carry germs of disease, particularly those of tuberculosis, and may thus infect the child whose delicate system affords a most excellent nidus for the development of such germs.

Few persons realize the very great difference that exists between the chemical and physical compositions of cow's and human milk. Without going too deeply into the chemistry of the lacteal fluid we may say that human milk is decidedly alkaline in reaction, while the milk of the cow is acid. Then, too, human milk contains more sugar and less albumenoids than does cow's milk. But not only is the difference of albumenoids one of quantity, the latter in human milk form in the stomach, when acted on by the gastric juice, a coagulum which is soft and flocculent and consequently easily digested.

On the other hand the albumenoids in cow's milk coagulate into hard firm masses that require considerable muscular exertion on

the part of the stomach to break up and digest them. This fact is an important one in the etiology of infantile diarrhœa. The delicate stomach of a child is often unable to cope with the hard indigestible curd, and the latter contains, when it has not been sterilized, the germs of putrifaction. These germs find in the weakened stomach every condition that is favorable to their rapid development. The curd, consequently, instead of being digested is putrified and the poisonous products of the latter process cause an inflammation that is often fatal in its results. If, as may be the case, the milk contains the bacillus of typhoid fever, or that of dysentery, or that of Asiatic cholera, then either of the three diseases is apt to follow.

There is no surer way of implanting the infectious diseases I have mentioned than through the medium of infected milk. But, you ask, how can milk be infected with such diseases? Very easily; milkmen are proverbially dishonest. They frequently water their wares and they are by no means fastidious as to the quality of the water used by them for the purpose. I have found frogs, small eels and water-snakes in milk brought into this city.

Some one has called the cow "the curse of mankind" because of the part she plays in the spread of tuberculosis. I am inclined to believe he is right. To prevent the tough firm curding of cow's milk various methods have been devised—attenuation by adding water is resorted to and substances such as barley are added. These act mechanically on the separation of the casein. But all these methods have been found to be only partially successful. Sometimes pancreatin is used to partially digest the albumenoids of cow's milk and to thus render them more like those in human milk.

The objection advanced against this is that the operation of artificial digestion is a delicate one, requiring expert knowledge and experienced manipulation, and that it cannot be left to the mother or nurse. At one time the process may be carried too far, and the milk is bitter and unpalatable, at another it is not carried far enough to be of any practical use.

PREPARED FOODS.

Many prepared foods are offered to the medical practitioner, each claiming special advantages.

As the physician is usually unable to personally examine these foods, to determine their composition, he must rely more or less on

the statements of the manufacturers and test such foods by actual practice.

In using prepared foods very great care should be taken at the outset to see that they are in good condition, that no deterioration has taken place through infection with the germs of putrification or of disease. We can only be certain in this respect of those foods that are delivered to us in hermetically sealed packages; the contents of which, when milk has been used, having been sterilized before packing. There is little doubt but that much harm has been done by the use of partially spoiled foods.

It has been quite positively settled that an infant under seven months old cannot digest starchy food. The salivary glands are not yet properly developed, and the secretion of Ptyalin, the ferment of the saliva which acts on starch, does not exist until after the above age. It would naturally seem then that an all milk food would be the only one to use. As far as I am aware Reed & Carnrick's Lacto Preparata is the only food of this kind offered to the medical profession or public, and from what I know of its composition, its preparation and the results obtained by its use I am justified in saying that it is a most excellent substitute for mothers' milk, and is the safest to use during epidemics of Typhoid Fever, Cholera Infantum and Asiatic Cholera. The milk used in Lacto-Preparata is selected with great care, the daries being under constant supervision. The milk is run through centrefugal machines which not only removes the cream, that constituent which would cause deteoriation of the product on keeping, but which also removes all foreign particles, thoroughly cleansing the milk, so to speak.

The cream later on is partly replaced with purified cocoa butter which has been found by experiment to be as digestible as milk-fat and of equal nutritive value; moreover it does not spoil.

The mixture of milk and cocoa butter is now made alkaline with lime water, then sterilized, evaporated to dryness, ground and packed in hermetically sealed sterilized cans.

The same firm produce another food, adapted to the use of older infants and of invalids, called Carnrick's Soluble Food. It is prepared similar to the Lacto-Preparata, but contains about one-half (½) its bulk of dextrinized flour.

There is only one word of caution that must be given concerning

the artificial feeding of infants; it is this: Watch carefully the condition of the child; if its flesh becomes flabby and it does not seem to thrive as it ought, try the effect of small doses of a reliable emulsion of Cod Liver Oil. It is possible that the system needs a little more fat than it is getting in its food. No prepared food, as far as I know, contains as much fat as the one recommended in this paper, but it is impossible to prepare a palatable food that will keep and which will not be open to more serious objections than a slight deficiency in fat. CYRUS EDSON.

Persistent Continued Fever—Treatment by Antipuralgos.

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